12/18/2009 15:32

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 0 1 2009 30 2009 1 1 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 12 18 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 145

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

D [®]D 11 0 1 2009 11 3 0 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 1339674.06 January 1 (b) Cash on Hand at 1863414.35 Begining of Reporting Period 216878.51 1637418.23 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 2080292.86 2977092.29 6(a) and 6(c) for Column B) 65901.18 962700.61 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 2014391.68 2014391.68 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 145

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

м м 1 1

From:

D D 0

^Y 2009

To:

м м 1 1 D D D

^Y 2009

I. Receipts 11. Contributions (other than loans) From: (a) Individuals/Persons Other		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Than Political (i) Itemized (Committees use Schedule A)	107896.47	731723.60
` '	d	50879.90	324478.93
(iii) TOTAL (a Lines 11(a	add a)(i) and (ii)	158776.37	1056202.53
	Committees	0.00	0.00
	Committees s)tions (add Lines	0.00	0.00
11(a)(iii),(b) a Totals to Line	nd (c)) (Carry 33, page 5)	158776.37	1056202.53
2. Transfers From Af	iliated/Other	57849.00	556210.00
3. All Loans Received		0.00	0.00
Loan Repayments Offsets To Operati	Received	0.00	0.00
(Refunds, Rebates (Carry Totals to Lir	, etc.) e 37, page 5)	0.00	0.00
 Refunds of Contrib to Federal candidat Political Committee 		0.00	22000.00
 Other Federal Reco (Dividends, Interes 	eipts t, etc.)	253.14	3005.70
	n-Federal and Levin Funds		
(a) Non-Federal Ac (from Schedul	e H3)	0.00	0.00
(b) Levin Funds (fr	om Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
D. Total Receipts (add 12, 13, 14, 15, 16,	Lines 11(d), 17, and 18(c))	216878.51	1637418.23
. Total Federal Recei (subtract Line 18(c)	pts from Line 19)	216878.51	1637418.23

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		-
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	401.18	5891.42
	Expenditures(c) Total Operating Expenditures	401.16	3031.42
	(add 21(a)(i), (a)(ii) and (b))	401.18	5891.42
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	65500.00	952991.69
24.	Independent Expenditure	0.00	0.00
25.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	900.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	900.00
	(add Lines 20(a), (b), and (c))		
29.	Other Disbursements	0.00	2917.50
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	65901.18	962700.61
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	65901.18	962700.61

DETAILED SUMMARY PAGE

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	158776.37	1056202.53
34.	Total Contribution Refunds (from Line 28(d))	0.00	900.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	158776.37	1055302.53
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	401.18	5891.42
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	401.18	5891.42

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 145 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael Murphy Mailing Address 3394 Creek View City Medford FEC ID number of contributing federal political committee. Name of Employer Asante Health System	State Zip Code OR 97504-9624 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	Vice President of Medical Affairs Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Kevin Earls Mailing Address 671 Kingwood Drive N	IW	Date of Receipt 1 1 0 2 2 0 0 9
City	State Zip Code	Transaction ID: 17653481
Salem	OR 97304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Oregon Association of Hos- pitals & Heal Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Finance & Health Pol Aggregate Year-to-Date 500.00	lic
Full Name (Last, First, Middle Initial) Mr. Marvin Haas		Date of Receipt
Mailing Address 2650 Siskiyou Blvd.		11 02 7 2009
City Medford	State Zip Code OR 97504-8170	Transaction ID: 17653482
FEC ID number of contributing federal political committee.	C 9/304-8170	Amount of Each Receipt this Period 250.00
Name of Employer Asante Health System	Occupation Vice President, Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/145 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Terry O Finklein			Date of Receipt
Mailing Address 2111 Exchange Stre	eet		11 02 2009
City Astoria	State OR	Zip Code 97103-3329	Transaction ID: 17653484 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37100 0020	250.00
Name of Employer Columbia Memorial Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Winford Howard	 		Date of Receipt
Mailing Address 1131 Michael Lane			1 1 0 2 2 0 0 9
City Eagle Point	State OR	Zip Code 97524-9509	Transaction ID: 17653490 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37324 3303	250.00
Name of Employer Asante Health System	Occupation Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Tim Hermann			Date of Receipt
Mailing Address 1965 Alder St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17653493
Eugene FEC ID number of contributing federal political committee.	OR	97405-2937	Amount of Each Receipt this Period 250.00
Name of Employer Sacred Heart Medical Cent-	Occupation Regional	n VP Hosp. Operations	
er Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	'	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 145 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and	Statements may		13 14 15 16
or for commercial purposes, other than using the	ne name and addi	ress of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Skip Kriz			Date of Receipt
Mailing Address 3370 Lakeview Drive			1 1 0 2 2 0 0 9
City	State	Zip Code	Transaction ID: 17653505
<u>Eugene</u>	OR	97408-7207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Sacred Heart Medical Cent-	Occupation Chief Fina	ancial Officer	
er Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	33 130	250.00	
Full Name (Last, First, Middle Initial) Mr. Mel Pyne			Date of Receipt
Mailing Address 3015 Summit Sky Bl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17653507
Eugene	OR	97405-6253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer PeaceHealth	Occupation CEO		
Receipt For: Primary General Other (specify) ▼	Aggregate '	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr Terry Murphy			Date of Receipt
Mailing Address 640 South State Stre	et		11 / 02 / Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17655944
Dover	DE	19901-3597	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Bayhealth Medical Center	Occupation Executive	Vice President and Chief C	Эре
Receipt For:	Aggregate `	Year-to-Date ▼	_ [
Primary General Other (specify) ▼		500.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Deborah L. Watson Mailing Address 77 Brynberry Cour City Magnolia	t State Zip Code DE 19962-1596	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Bayhealth Medical Center Receipt For: Primary General Other (specify)	Occupation Vice President Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Mrs. Bonnie Perratto Mailing Address 6 Derbyshire Ct. City Dover FEC ID number of contributing	State Zip Code DE 19904-5746	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	Occupation Sr.VP/Chief Nurse Executive Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr Joel Beiswenger Mailing Address 415 North Jefferso	n Street	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wadena FEC ID number of contributing federal political committee.	State Zip Code MN 56482-1297	Transaction ID: 17655960 Amount of Each Receipt this Period 250.00
Name of Employer Tri-County Hospital	Occupation Director Financial Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	675.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each	parate schedule(s) n category of the d Summary Page	FOR LINE NUMBER: PAGE 10 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sol name and address of an	d or used by any perso y political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Ms. Ann Gibson Mailing Address 2550 University Avenue	e W.		Date of Receipt
	Suite 350-S City Saint Paul	State Zip C	ode 4-1052	Transaction ID: 17655963 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		67.30
	Name of Employer Minnesota Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Director, Federal I Aggregate Year-to-D		
3.	Full Name (Last, First, Middle Initial) Mr. James F Hanko Mailing Address 1300 Anne St. NW			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip C	ode	Transaction ID: 17655964
	Bemidji FEC ID number of contributing federal political committee.	MN 5660	1-5103	Amount of Each Receipt this Period 75.00
	Name of Employer North Country Regional Hospital Receipt For: Primary General Other (specify) ▼	Occupation President and Chi Aggregate Year-to-D	ef Executive Officer ate ▼ 525.00	
_ :_	Full Name (Last, First, Middle Initial) Mr. Richard Kreyer			Date of Receipt
•	Mailing Address 2550 University Avenue	e W.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Saint Paul	State Zip C	ode 4-1052	Transaction ID: 17655966 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		74.02
	Name of Employer Minnesota Hospital Associ- ation	Occupation Vice President, W	ork Force	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	ate ▼ 211.49	
	SUBTOTAL of Receipts This Page (optional)		·····	216.32
Γ	TOTAL This Period (last page this line number of	anly)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 145 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	13 14 15 16 1 1 15 16 1 16 1 16 1 16 1 1
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Lawrence J Massa		Date of Receipt
Mailing Address 2550 University Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17655967
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Minnesota Hospital Associ- ation	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	620.00	
Full Name (Last, First, Middle Initial) Mr. James Morris		Date of Receipt
Mailing Address 301 Second Street N	Vortheast	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17655968
New Prague	MN 56071-1709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Queen of Peace Hospital	Occupation Trustee	7
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. David Adams		Date of Receipt
Mailing Address 1045 Ashland Place		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17655980
Lynchburg	VA 24503-2533	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Centra Health	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>	620.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Lewis C Addison		Date of Receipt
Mailing Address 1920 Atherholt Road		11 02 2009
City Lynchburg	State Zip Code VA 24501-1104	Transaction ID: 17655981 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Centra Health	Occupation Senior Vice President and Chief Final	nd
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Rodger H Baker Mailing Address 500 Hospital Drive		Date of Receipt
·	State Zip Code	11 02 2009
City Warrenton	State Zip Code VA 20186-3027	Transaction ID: 17655982 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Fauquier Hospital	Occupation President and Chief Executive Officer	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Sean T. Barden		Date of Receipt
Mailing Address 11422 Bluff's Ridge		11 02 7 2009
City Spotsylvania	State Zip Code VA 22551-8915	Transaction ID: 17655987 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 22331-0313	350.00
Name of Employer Medicorp Health System	Occupation EVP/CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form	Use separate schefor each category o	
ITEMIZED RECEIPTS	Detailed Summary	
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by sing the name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC	
Full Name (Last, First, Middle Initial)		
Mr. Larry L. Boyles Mailing Address 306 Marl Ravine	Pond	Date of Receipt
		11 02 2009
City Yorktown	State Zip Code VA 23692-4206	Transaction ID: 17656025
FEC ID number of contributing federal political committee.	C 25092-4200	Amount of Each Receipt this Period 350.00
Name of Employer Riverside Health System	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) Dr Gene Burke, , M.D.	I	Date of Receipt
Mailing Address 600 Gresham D	rive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17656032
Norfolk	VA 23507-1999	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Norfolk General Hospital	Occupation Vice President Medical Affai	irs
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) Mr Joseph Butz		Date of Receipt
Mailing Address 919 Graydon Av	е	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17656033
Norfolk	VA 23507-1207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Norfolk General Hospital	Occupation VP Cardiac/Transplant Ser	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
SUBTOTAL of Receipts This Page (opti	onal)	1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to s	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Christine M. Candio		Date of Receipt
Mailing Address 501 Holland Lane #1109		11 02 2009
City	State Zip Code	Transaction ID: 17656034
Alexandria	VA 22314-3553	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Patrick L. Christiansen		Date of Receipt
Mailing Address 8377 Pedigrue Ct		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17656105
Gainesville	VA 20155-3240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation Administrator - Heart and Vascular Ins	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Ben Clark		Date of Receipt
Mailing Address 1920 Atherholt Road		1 1 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17656106
Lynchburg	VA 24501-1104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Centra Health	Occupation Vice President and Chief Information C	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	>	1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Craig Connors		Date of Receipt
Mailing Address 6020 Allegaheny Rd	7.0.1	111 02 2009
City Williamsburg	State Zip Code VA 23188-7370	Transaction ID: 17656108
FEC ID number of contributing federal political committee.	C 23188-7370	Amount of Each Receipt this Period 350.00
Name of Employer Riverside Health System	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Ruth Dyster		Date of Receipt
Mailing Address 1034 Towlson Rd		11 02 7 2009
City	State Zip Code	Transaction ID: 17657475
<u>McLean</u>	VA 22102-1111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Virginia Hospital Center - Arlington	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Barry Gross		Date of Receipt
Mailing Address 1602 York River Drive		11 02 7 9 9
City	State Zip Code	Transaction ID: 17657942
Gloucester Point FEC ID number of contributing federal political committee.	VA 23062-2511	Amount of Each Receipt this Period 350.00
Name of Employer Riverside Health System	Occupation	-
	Hospital Administrator	4
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number of	<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	itatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Dr. Joanne Gutliph, MD Mailing Address 7965 Valderrama Ct. City	State	Zip Code	Date of Receipt M
	Gainesville	VA	20155-2825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer Prince William Hospital	, ' 	n/Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
- 3.	Full Name (Last, First, Middle Initial) Ms. Shirley Holland Mailing Address 161 Lila Lane			Date of Receipt
				11 02 2009
	City	State	Zip Code	Transaction ID: 17658274
	Boones Mill FEC ID number of contributing federal political committee.	C	24065-3749	Amount of Each Receipt this Period 350.00
	Name of Employer Carilion Clinic	Occupation Vice Pre		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
-).	Full Name (Last, First, Middle Initial) Mr. Thomas C. Jividen			Date of Receipt
	Mailing Address 2713 Greenhill Avenue)		1 1 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17658448
	Lynchburg	VA	24503-2923	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer Centra Health		ice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			1050.00
r	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Michael King Mailing Address 4271 Brown Roan Lr City	1 State Zip Code	Date of Receipt 1 1 0 2 2 0 0 9 Transaction ID: 17681684
Harrisonburg FEC ID number of contributing federal political committee.	VA 22801-8310	Amount of Each Receipt this Period 350.00
Name of Employer Rockingham Memorial Hospital Receipt For: Primary General Other (specify)	Occupation SVP/Finance & VFO Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. David Levin, MD. Mailing Address 1476 Bridge Point Tr	rail	Date of Receipt 1 1 0 2 2 2 0 0 9
City	State Zip Code	Transaction ID: 17681686
Suffolk FEC ID number of contributing federal political committee.	VA 23432-1320	Amount of Each Receipt this Period 350.00
Name of Employer Sentara Healthcare	Occupation Vice President Medical Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Rob Lockridge		Date of Receipt
Mailing Address 14304 Horseshoe Fo	ord Rd	11 02 7 9 9
City	State Zip Code	Transaction ID: 17681687
Ashland FEC ID number of contributing federal political committee.	VA 23005-3163	Amount of Each Receipt this Period 350.00
Name of Employer University of Virginia Me- dical Center	Occupation Director, Government Relations	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
	_	1050.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 1
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms James Lesnick Mailing Address 629 Fairfax Way City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Williamsburg FEC ID number of contributing federal political committee.	C	23185-8204	Amount of Each Receipt this Period 350.00
	Name of Employer Riverside Health System Receipt For: Primary General Other (specify) ▼	Occupation Trustee Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Ms Dana Lovecchio Mailing Address 103 South Cove Rd	1		Date of Receipt 1 1 0 2 2 2 0 0 9
	City	State	Zip Code	Transaction ID: 17681689
	Williamsburg FEC ID number of contributing federal political committee.	C	23188-9325	Amount of Each Receipt this Period 350.00
	Name of Employer Riverside Health System	Occupation V/P Cons		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Ms. Susan MacLeod Mailing Address 700 Surfside Ave	1		Date of Receipt 1 1 0 2 2 0 0 9
	City	State	Zip Code	Transaction ID: 17681690
	Virginia Beach FEC ID number of contributing federal political committee.	C	23451-3677	Amount of Each Receipt this Period 200.00
	Name of Employer Maryview Medical Center	Occupation	n e Vice President	
	Receipt For: Primary General Other (specify) ▼	1	e Year-to-Date ▼ 350.00	
	UBTOTAL of Receipts This Page (optional)			900.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for cor	mmercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	E OF COMMITTEE (In Full) rican Hospital Association PAC			
A. Ms Bo	lame (Last, First, Middle Initial)			Date of Receipt
	g Address 8650 Sudley Rd	Ctata	7:n Code	11 02 2009
City Man	assas	State VA	Zip Code 20110-4419	Transaction ID: 17681692 Amount of Each Receipt this Period
FEC I	ID number of contributing al political committee.	C	20110 4410	250.00
Name Princ	e of Employer e William Hospital	Occupatio Admin D		
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
B. Mr. M	lame (Last, First, Middle Initial) ark R Stoddard	l		Date of Receipt
Mailin	g Address 48 West 1500 North			11 03 2009
City		State	Zip Code	Transaction ID: 17681719
<u>Neph</u>		UT	84648-8900	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		500.00
Name Rural	e of Employer Health Group	Occupatio Presiden		
	pt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
	lame (Last, First, Middle Initial) ichard J Pearce			Date of Receipt
Mailin ———	g Address 701 Town Center Dr, S	Ste 1000		11 02 7 2009
City	port News	State VA	Zip Code 23606-4286	Transaction ID: 17681722 Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.	C	25000-4200	350.00
Name Rivers	e of Employer side Health System	Occupatio Presiden	n t and Chief Executive Office	
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTO	TAL of Receipts This Page (optional)			1100.00
	This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 145 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) Ms. Melina Dee Perdue		Date of Receipt
Mailing Address 101 Elm Avenue SE		11 02 7 2009
City	State Zip Code	Transaction ID: 17681724
Roanoke	VA 24013-2222	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Clinic	Occupation Senior Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Theodore Price	<u>'</u>	Date of Receipt
Mailing Address 6709 River Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681730
Richmond	VA 23229-8529	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sheltering Arms Rehabilit- ation Hospita	Occupation Board Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Charlotte Ramsey		Date of Receipt
Mailing Address 6216 Crooked Stick	Way	1 1 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681733
Radford	VA 24141-7025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion New River Valley Medical Cent	Occupation Chief Nursing Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00]
		1050.00

SCHEDULE A (FEC FOI ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Re or for commercial purposes, other that NAME OF COMMITTEE (In Full) American Hospital Associati	ports and Statements may not be sold or used by any person using the name and address of any political committee to on PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Init Ms. Katherine Reeves Mailing Address 10175 Bevoi City Fort Belvoir FEC ID number of contributing federal political committee. Name of Employer Inova Health System	State Zip Code VA 22060-2119 C Occupation Administrator	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Init Mr Xavier Richardson Mailing Address 8121 Lee Ja	·	Date of Receipt 1 1
City	State Zip Code	Transaction ID: 17681735
Spotsylvania FEC ID number of contributing federal political committee.	VA 22553-3819	Amount of Each Receipt this Period 350.00
Name of Employer Medicorp Health System	Occupation Vice President Corporate Developme	ent
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Init	al)	Date of Receipt
Mailing Address 245 Chesape	eake Avenue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681736
Newport News	VA 23607-6038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Riverside Rehabilitation Institute	Occupation Vice President and Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page	·	1050.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John T Stanley		Date of Receipt
Mailing Address 128 Loblolly Dr.		1 1 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681748
Yorktown	VA 23692-4253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Riverside Health System	Occupation Vice President Planning and Information	<u>-</u> 2
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Todd Stottlemyer		Date of Receipt
Mailing Address 12518 Nathaniel C	Daks Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681749
Herndon	VA 20171-1731	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Emory W. Tibbs, Jr.		Date of Receipt
Mailing Address Belleview Ave. at a	Jefferson Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681753
Roanoke	VA 24014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Clinic	Occupation Trustee	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)	1050.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 145 (check only one) X 11a 11b 11c 12
Any information copied from such Reg	ports and Statements may not be sold or used by any person	13 14 15 16 17 for the purpose of soliciting contributions
or for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	n using the name and address of any political committee to s	olicit contributions from such committee.
Full Name (Last, First, Middle Initia Mr. Andrew P. Weddle	ul)	Date of Receipt
Mailing Address 2708 Sandy \	/alley Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681766
Virginia Beach	VA 23452-7751	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer Sentara Bayside Hospital	Occupation Vice President, Revenue Cycle	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initia Mr. Reginald J. Lavoie	J)	Date of Receipt
Mailing Address Swiftwater Ro	pad	1 1 0 3 2 0 0 9
City	State Zip Code	Transaction ID: 17681773
Woodsville	NH 03785-2001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cottage Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initia Mr Frank G McDougall	l)	Date of Receipt
Mailing Address One Medical	Center Drive	1 1 0 3 2 0 0 9
City	State Zip Code NH 03756-0001	Transaction ID: 17681774
Lebanon		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Dartmouth-Hitchcock Medic- al Center	Occupation Vice President, Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	950.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. Scott W Howe			Date of Receipt
Mailing Address 173 Middle Street			1 1 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lancaster	State NH	Zip Code 03584-3508	Transaction ID: 17681775 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00004 0000	350.00
Name of Employer Weeks Medical Center	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Donald L Shumway			Date of Receipt
Mailing Address 1 Verney Drive			1 1 0 3 2 0 0 9
City	State	Zip Code	Transaction ID: 17681776
Greenfield	NH	03047-5000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Crotched Mountain Rehabil- itation Cente	Occupatio Chief Exc	n ecutive Officer	
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		350.00	
Full Name (Last, First, Middle Initial) Ms. Deanna S. Howard			Date of Receipt
Mailing Address 5 Paine Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17681777
<u>Etna</u>	NH	03750-4508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Dartmouth-Hitchcock Medic- al Center		Regional Program Developr	ment
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify) General		350.00	
			1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Stephanie Wolf-Rosenblum, , M.D.		Date of Receipt
Mailing Address P O Box 2014		M M / D D / Y Y Y Y Y Y 1 1 1 0 3 2 0 0 9
City	State Zip Code	Transaction ID: 17681779
Nashua	NH 03061-2014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Southern New Hampshire Me- dical Center	Occupation Vice President Medical Affairs	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan		Date of Receipt
Mailing Address 283 Gallopiny Hill Roa	ad	M M / D D / Y Y Y Y Y Y 1 1 1 0 3 2 0 0 9
City	State Zip Code	Transaction ID: 17681780
<u>Hopkinton</u>	NH 03229-3402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer New Hampshire Hospital As- sociation	Occupation V.P., Finance and Rural Hospitals	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Robert J Heckert, , Jr.		Date of Receipt
Mailing Address 2669 North Scenic Dri	ve	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17681783
Alamogordo	NM 88310-8700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Gerald Champion Regional Medical Cente	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr John G Albert, FACHE		Date of Receipt
Mailing Address 28 Hawtorne Road		1 1 0 3 2 0 0 9
City	State Zip Code	Transaction ID: 17681786
Windham	NH 03087-1565	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kindred Hospital Northeas-	Occupation Director	
t-Stoughton Receipt For:	Executive Director	\dashv
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth Boyd, , Jr.		Date of Receipt
Mailing Address PO Box 12		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17682098
Girard	KS 66743-0012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Girard Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John R. Broberg		Date of Receipt
Mailing Address 1020 Parkshire Cir		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17682101
Manhattan	KS 66503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Regional Health Cen- ter	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 145 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert L Driewer, , CHE Mailing Address 1201 W. 12th Avenue City Emporia FEC ID number of contributing federal political committee. Name of Employer Newman Regional Health Receipt For:	State Zip Code KS 66801-2504 C Occupation Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	250.00	Data of Bassiet
Mr. Dennis L George Mailing Address 801 N Fourth City	State Zip Code	Date of Receipt M M
Burlington	KS 66839-0189	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Coffey County Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. John H Jeter, , M.D.		Date of Receipt
Mailing Address 3103 Tam O'Shanter		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17682168
Hays	KS 67601-8100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hays Medical Center	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 145 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Jackie John Mailing Address Post Office Box 506			Date of Receipt
City Phillipsburg FEC ID number of contributing	State KS	Zip Code 67661-0506	1 1 0 4 2 0 0 9 Transaction ID: 17682169 Amount of Each Receipt this Period 250.00
Name of Employer Great Plains Health Allia- nce, Inc. Receipt For: Primary General Other (specify)		n sident, Resource Developme Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mrs. Laurie Labarca Mailing Address 8242 E. Greenbriar	Ct.		Date of Receipt 1 1 0 4 2 0 0 9
City	State	Zip Code	Transaction ID: 17682173
Wichita FEC ID number of contributing federal political committee.	C	67226-1807	Amount of Each Receipt this Period 125.00
Name of Employer Via Christi Rehabilitation Center Receipt For: Primary General Other (specify) ▼	_ , '	n erating Officer • Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Kenneth Lindsey			Date of Receipt
Mailing Address 1100 Fairway Drive			11 04 2009
City Hays	State KS	Zip Code 67601-4710	Transaction ID: 17682176 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07001-4710	25.00
Name of Employer Hays Medical Center	Occupation Chief Me	n dical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 202.50	
SUBTOTAL of Receipts This Page (optional)		400.00

SCHEDULI	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercia	copied from such Reports and St I purposes, other than using the DMMITTEE (In Full)	tatements may name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American H	lospital Association PAC			
Mr. Fred J. Luc	•			Date of Receipt
Mailing Addre	ss 14607 W 89	Ctata	7:a Cada	11 04 2009
City Lenexa		State KS	Zip Code 66215-2967	Transaction ID: 17682178
	er of contributing al committee.	C	00213-2907	Amount of Each Receipt this Period 165.00
Name of Emp Kansas Hosp on	loyer ital Associati-	Occupation Senior Vi	n ice President	
Receipt For:	General	Aggregate	e Year-to-Date ▼	-
-	specify) 🔻		471.26	
Full Name (La Mr. Eugene W	ast, First, Middle Initial) Meyer			Date of Receipt
Mailing Addre	ss 26342 W 110th Terrace	е		1 1 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 17682190
<u>Olathe</u>		KS	66061-8413	Amount of Each Receipt this Period
FEC ID numb	er of contributing al committee.	С		250.00
Name of Emp Lawrence Me	loyer morial Hospital	Occupation Presiden	n t and Chief Executive Office	er
Receipt For:		Aggregate	e Year-to-Date ▼	
Primary Other (s	☐ General pecify) ▼	0 0	250.00	
Full Name (La Mr. Robert K. I	ast, First, Middle Initial) Page			Date of Receipt
Mailing Addre	ss 13413 W 75th Ct			1 1 0 4 2 0 0 9
City		State KS	Zip Code	Transaction ID: 17682208
Shawnee FEC ID numb federal politica	er of contributing	C	66216-3078	Amount of Each Receipt this Period 350.00
Name of Emp University of I	loyer Kansas Hosp-	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary	General		e Year-to-Date ▼ 350.00	
SUBTOTAL of	Receipts This Page (optional)			765.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 145 (check only one) X
Any information copied from such Repor or for commercial purposes, other than u	ts and Statements may not be sold or used by any perso sing the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association		
Full Name (Last, First, Middle Initial) Mr. John C. Peterson		Date of Receipt
Mailing Address 2841 SW Plass	Avenue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17682214
Topeka	KS 66611-1629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kansas Hospital Associati-	Occupation Administrator	
on Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mrs. Lynnette A. RauvolaBouta		Date of Receipt
Mailing Address 25 Huntington S	St.	1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17682220
Eastborough	KS 67206-2047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Via Christi Health System	Occupation Vice President Mission Integration	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Steven R. Michaud		Date of Receipt
Mailing Address 7 Ivanhoe Drive		11 09 2009
City	State Zip Code	Transaction ID: 17682534
<u>Topsham</u>	ME 04086-6109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Maine Hospital Association	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of Passints This Page (on	tional)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Heather Drevna Mailing Address 3205 Ravensworth P		Date of Receipt
		11 05 2009
City <u>Alexandria</u>	State Zip Code VA 22302-2107	Transaction ID: 17687302 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Member Com	mµnica
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. JoAnn Birdzell		Date of Receipt
Mailing Address 12431 Van Buren Str	eet	11 05 2009
City	State Zip Code	Transaction ID: 17687735
Crown Point FEC ID number of contributing federal political committee.	IN 46307-9210	Amount of Each Receipt this Period 250.00
Name of Employer St. Catherine Hospital, Inc.	Occupation Hospital CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)	0 0 0 0 0 0 0 0 0	1
Mr. Blake A Dye Mailing Address 2805 W. County Roa	4 050 0	Date of Receipt
		11 05 2009
City New Castle	State Zip Code IN 47362-9719	Transaction ID: 17687775 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Henry County Hospital	Occupation Hospital CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1100.00
TOTAL This Period (last page this line number	·	

SCHEDULE A ITEMIZED REC	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c 11c 13 14 15	32 / 145 12 16
Any information copied or for commercial purp	from such Reports and Statoses, other than using the na	tements may ame and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contribusions from such comm	
NAME OF COMMI			, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, Fin Mr. Timothy A Flesch				Date of Receipt	
Mailing Address 3				M M / D D / Y Y Y 1 1 1 1 2 2	0 0 9
City Evansville		State IN	Zip Code 47715-3400	Transaction ID: 17687782	and and
FEC ID number of cederal political com		C	4//15-3400	Amount of Each Receipt this P	00.00
Name of Employer St. Mary's Medical of Evansvill	Center	Occupation Hospital (
Receipt For: Primary Other (specify	General	Aggregate	Year-to-Date ▼ 500.00		
Full Name (Last, Fi	st, Middle Initial)			Date of Receipt	
Mailing Address 3	8818 Devonshire Lane			1 1 0 5 Y Y	0 0 9
City		State	Zip Code	Transaction ID: 17687813	
Bloomington		IN	47408-9657	Amount of Each Receipt this P	eriod
FEC ID number of of federal political com		С		3	75.00
Name of Employer Bloomington Hospit	al	Occupation Board Me			
Receipt For:		Aggregate	Year-to-Date ▼		
Other (specify	General ') ▼		375.00		
Full Name (Last, Fi Gary A Meyer	st, Middle Initial)			Date of Receipt	
Mailing Address 2	280 Locust Court East				0 0 9
City		State	Zip Code	Transaction ID: 17687818	
<u>Seymour</u>		IN	47274-8672	Amount of Each Receipt this P	eriod
FEC ID number of of federal political com		С		2	50.00
Name of Employer Schneck Medical C	enter	l	and Chief Executive Officer		
Receipt For: Primary Other (specify	General	Aggregate	Year-to-Date ▼ 250.00		
SUBTOTAL of Recei	ots This Page (ontional)			112	25.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may r	not be sold or used by any perso ess of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Mark E Moore			Date of Receipt
Mailing Address 2696 E. Ciana Court			M M / D D / Y Y Y Y Y 1 Y 1 1 1 0 5 2 0 0 9
City	State	Zip Code	Transaction ID: 17687822
Bloomington	IN	47401-8358	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Bloomington Hospital	Occupation President	and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)			Data of Respiret
Ms. Linda E White Mailing Address 5505 Timberlake Court	i		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17687866
Evansville	IN	47710-4134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Deaconess Health System	Occupation Hospital C	EO	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James L Brexler			Date of Receipt
Mailing Address 975 East Third Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17687975
Chattanooga	TN	37403-2163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Erlanger Health System	Occupation President	and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		>	1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 145 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to s	1 13 14 15 16 1 a for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Gregory M. Duckett		Date of Receipt
Mailing Address 350 North Humphre	eys Boulevard	11 05 2009
City	State Zip Code	Transaction ID: 17687976
Memphis	TN 38120-2177	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Baptist Memorial Health	Occupation Senior Vice President/ Corporate Cour	ns.
Care Corporati Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Bernard L Mattingly		Date of Receipt
Mailing Address P O Box 340		11
City	State Zip Code	Transaction ID: 17687978
Cookeville	TN 38503-0340	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Cookeville Regional Medic- al Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Stephen Curtis Reynolds		Date of Receipt
Mailing Address 350 North Humphre	eys Boulevard	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17687979
<u>Memphis</u>	TN 38120-2177	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Baptist Memorial Health Care Corporati	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
	l)	1350.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using	and Statements may not be sold or used by any person ng the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	AC	
Full Name (Last, First, Middle Initial) Mr. Charles H Whitfield, , Jr.		Date of Receipt
Mailing Address 1420 Tusculum B	oulevard	1 1 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17687984
Greeneville	TN 37745-5825	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	485.00
Name of Employer Laughlin Memorial Hospital	Occupation President and Chief Executive Officer	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 485.00	
Full Name (Last, First, Middle Initial) Ms Charlesetta Woodard-Thompson	I	Date of Receipt
Mailing Address 975 East Third St	reet	11 05 2009
City	State Zip Code	Transaction ID: 17687986
Chattanooga	TN 37403-2163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Erlanger Health System	Occupation Executive Vice President and COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James A Cruickshank		Date of Receipt
Mailing Address 2260 Wrightsboro	Road	11 05 2009
City	State Zip Code	Transaction ID: 17688035
Augusta	GA 30904-4764	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Trinity Hospital of Augus- ta	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	1235.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 145 (check only one) X
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to n PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initia Mr. Ken Haynes Mailing Address One Saint Jos	·	Date of Receipt 1 1 0 6 2 0 0 9
City	State Zip Code	Transaction ID: 17693123
Lexington FEC ID number of contributing federal political committee.	KY 40504-3742	Amount of Each Receipt this Period 350.00
Name of Employer Saint Joseph Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initia Mr Henry D Lipman Mailing Address 179 Sara Circ	,	Date of Receipt
City	State Zip Code	1 1 0 6 2 0 0 9 Transaction ID: 17693126
<u>Laconia</u>	NH 03246-3069	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer LRGHealthcare	Occupation Executive Vice President and Chief Fi	n
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initia Ms. Julie Quirin	l)	Date of Receipt
Mailing Address 2805 W 71st	Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17693128
Prairie Village	KS 66208-3104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Saint Luke's Hospital of Kansas City	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
		1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John M Fraser, FACHE Mailing Address 8511 West Dodge Roa City Omaha FEC ID number of contributing federal political committee. Name of Employer Nebraska Methodist Health System, Inc. Receipt For: Primary General Other (specify)	State Zip Code NE 68114-3415 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr Vincent Capece Mailing Address 28 Crescent Street City Middletown FEC ID number of contributing federal political committee. Name of Employer Middlesex Hospital Receipt For: Primary General Other (specify)	State Zip Code CT 06457-3650 C Occupation Vice President Finance and Treasurer Aggregate Year-to-Date 350.00	Date of Receipt M M J 10 2009 Transaction ID: 17697956 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Dr. Susan L Davis, , R.N., Ed Mailing Address 72 N. Park avenue City Easton FEC ID number of contributing federal political committee. Name of Employer St. Vincent's Medical Center Receipt For: Primary General Other (specify)	State Zip Code CT 06612-1417 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M J D D J 2009 Transaction ID: 17697957 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)		1200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 145 (check only one) X
A	for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Pull Name (Last, First, Middle Initial) Dr. Brian Fillipo, MD Mailing Address 6192 Moores Creek		Date of Receipt
		01.1. 7'. O. d.	111 / 10 / 2009
	City Summerfield	State Zip Code NC 27358-8285	Transaction ID: 17697964 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Connecticut Hospital Association	Occupation Vice President, Quality and Patient S	— Ga
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
. –	Full Name (Last, First, Middle Initial) Gary Campbell		Date of Receipt
	Mailing Address 188 Inverness Drive W	est #500	1 1 1 1 0 2 0 0 9
	City	State Zip Code	Transaction ID: 17700580
	<u>Englewood</u>	CO 80112-5204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Centura Health	Occupation CEO	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Mr. Steve Dickson		Date of Receipt
	Mailing Address P.O. Box 1909		11 10 2009
	City	State Zip Code	Transaction ID: 17700601
	Madison FEC ID number of contributing federal political committee.	MS 39130-1909	Amount of Each Receipt this Period 666.73
	Name of Employer Mississippi Hospital Asso- ciation	Occupation President/CEO, Stratagem, Inc.	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 666.73	
	SUBTOTAL of Receipts This Page (optional)		1416.73

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	:	
Full Name (Last, First, Middle Initial) Mr. Richard G Hilton Mailing Address Drawer 1506		Date of Receipt
Mailing Address Drawer 1506 City	State Zip Code	1 1 1 0 2 0 0 9 Transaction ID: 17700716
Starkville	MS 39760-1506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Oktibbeha County Hospital	Occupation Associate Administrator and Chief Fin	_ a
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Steve Lesley		Date of Receipt
Mailing Address 116 Woodgreen Cro		11 10 2009
City	State Zip Code	Transaction ID: 17700722
Madison FEC ID number of contributing federal political committee.	MS 39130-1909	Amount of Each Receipt this Period 23.34
Name of Employer Mississippi Hospital Asso- ciation	Occupation Director of Data Services	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 267.38	
Full Name (Last, First, Middle Initial) Mr Edward Tucker		Date of Receipt
Mailing Address P O Box 16389		11 1 10 2009
City	State Zip Code	Transaction ID: 17700729
<u>Hattiesburg</u>	MS 39404-6389	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Forrest General Hospital	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional))	623.34
TOTAL This Period (last page this line numb	per only)	

Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
<i>'</i>		
Full Name (Last, First, Middle Initial) Mr. Robert Z. Vovak		Date of Receipt
Mailing Address 9326 Perglen Road City	State Zip Code	1 1 1 0 2 0 0 9 Transaction ID: 17700738
Baltimore	MD 21236-1628	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Maryland Hospital Associa- tion	Occupation Sr. Vice President & CFO	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Mr. David P. Foley		Date of Receipt
Mailing Address 6820 Deerpath Road		11 1 10 2009
City	State Zip Code	Transaction ID: 17700739
<u>Elkridge</u>	MD 21075-6200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Maryland Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Ms. Beverly L. Miller		Date of Receipt
Mailing Address 6820 Deerpath Road		11 1 10 YYYYY 2009
City	State Zip Code	Transaction ID: 17700740
Elkridge	MD 21075-6234	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Maryland Hospital Associa- tion	Occupation V.P., Professional Activities	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	750.00	
SUBTOTAL of Receipts This Page (optional)		1850.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from su or for commercial purposes, oth NAME OF COMMITTEE (In American Hospital Asso	ner than using the name and a n Full)	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd Ms. Denise Matricciani Mailing Address 4423 Ne City Nottingham	,	Zip Code 21236-2968	Date of Receipt 1 1 0 2 0 0 9 Transaction ID: 17700741 Amount of Each Receipt this Period
FEC ID number of contribut federal political committee. Name of Employer Maryland Hospital Association Receipt For: Primary Gen	Occupati Vice Pre		750.00
Full Name (Last, First, Midd Mr. George Frank Monius Mailing Address 3606 Ha	allmark Court State MD	Zip Code 21234-4823	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contribut federal political committee. Name of Employer Maryland Hospital Association Receipt For: Primary Gen Other (specify)	Occupati Vice Pro		750.00
Full Name (Last, First, Midd Mark S Rulle Mailing Address 1148 Ha City Hagerstown	le Initial) amilton Blvd. State MD	Zip Code 21742-3339	Date of Receipt 1 1 0 2 0 0 9 Transaction ID: 17700743 Amount of Each Receipt this Period
FEC ID number of contribut federal political committee. Name of Employer Maryland Hospital Association Receipt For: Primary Gen Other (specify)	Occupati Preside Aggrega	on nt, MHEI te Year-to-Date ▼	750.00
SUBTOTAL of Receipts This	Page (optional))	2250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Michael B Robbins		Date of Receipt
Mailing Address P.O. Box 8207		11 1 10 2009
City	State Zip Code	Transaction ID: 17700744
<u>Elkridge</u>	MD 21075-8207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer Maryland Hospital Associa-	Occupation	7
tion	Senior Vice President	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Ms. Catherine M. Crowley		Date of Receipt
Mailing Address 2100 Poplar Ridge Roa	ad	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17700745
<u>Pasadena</u>	MD 21122-3820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Maryland Hospital Associa- tion	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. James O'Loughlin		Date of Receipt
Mailing Address P O Box 100550		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17700834
Florence	SC 29501-0550	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Carolinas Hospital System	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		2500.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Lisa Van Dam Mailing Address 1318 Sunnyhill Drive			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Camdon	State SC	Zip Code	Transaction ID: 17700835
	Camden FEC ID number of contributing federal political committee.	C	29020-1597	Amount of Each Receipt this Period 250.00
	Name of Employer Kershaw County Medical Center Receipt For: Primary General Other (specify) ▼	Occupatio Nursing Aggregate		
В.	Full Name (Last, First, Middle Initial) Mr. Stuart Smith Mailing Address 169 Ashley Avenue	I		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17700836
	<u>Charleston</u>	SC	29425-8905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MUSC Medical Center of Medical Univers Receipt For: Primary Other (specify) ▼	. '	on sident Clinical Operations an e Year-to-Date ▼ 500.00	d
C.	Full Name (Last, First, Middle Initial) Mr. Douglas Bowling			Date of Receipt
-	Mailing Address 2509 Watercrest Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17700837
	Johns Island FEC ID number of contributing federal political committee.	SC C	29455-3108	Amount of Each Receipt this Period 500.00
	Name of Employer Roper Hospital	Occupatio Vice Pres	n sident of System Developme	nt
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		1250.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 145 (check only one) X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Ellen Jackson Brown Mailing Address 316 Calhoun Street City Charleston FEC ID number of contributing federal political committee. Name of Employer Roper Hospital Receipt For: Primary General	State Zip Code SC 29401-1113 C Occupation VP, Managed Care & Physician Servi Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Allen P Carroll Mailing Address 2095 Henry Tecklenbu	urg Drive	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code SC 29414-5733	Transaction ID: 17700841
Charleston FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Roper Hospital Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr. David L. Dunlap, FACHE		Date of Receipt
Mailing Address 125 Doughty Street Suite 760		11 1 1 2009
City <u>Charleston</u>	State Zip Code SC 29403-5736	Transaction ID: 17700842
FEC ID number of contributing federal political committee.	C 29403-5736	Amount of Each Receipt this Period 1500.00
Name of Employer Roper St. Francis Healthc- are Receipt For: Primary General	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 2250.00	
Other (specify) ▼		

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 145 (check only one) X
or for commercia	copied from such Reports and St al purposes, other than using the OMMITTEE (In Full) Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (La George T. Edv Mailing Addre		State	Zip Code	Date of Receipt M
<u>Charleston</u>		SC	29412	Transaction ID: 17700843 Amount of Each Receipt this Period
•	per of contributing	C	ESTIL I	250.00
Name of Emp Roper Hospit Receipt For: Primary Other (s	tal *		n of Legal Services e Year-to-Date ▼ 500.00	
. Rev Terence I	ast, First, Middle Initial) K Fleming Poss PO Box 357			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 17700844
Folly Beach	า	SC	29439-0357	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing al committee.	C		250.00
Name of Emp Roper Hospit	oloyer cal	Occupatio VP for M		
Receipt For: Primary Other (s	/ General specify) ▼	-	e Year-to-Date ▼ 500.00	
Full Name (La	ast, First, Middle Initial)			Date of Receipt
Mailing Addre		rive		M M / D D / Y Y Y Y Y Y Y 1 1 1 1 1 1 2 0 0 9
City		State	Zip Code	Transaction ID: 17700845
Mt Pleasan	t	SC	29464-4286	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing al committee.	C		250.00
Name of Emp Roper Hospit	oloyer ral	Occupatio Vice Pres	n sident, Human Resources	
Receipt For: Primary Other (/ General specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 145 (check only one) X
Ar	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and addr	not be sold or used by any person ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Lisa Irvin			Date of Receipt
	Mailing Address 159 Harbour Watch W	ay		11 / 11 / 2009
	City Mount Placeant	State SC	Zip Code	Transaction ID: 17700855
	Mount Pleasant FEC ID number of contributing federal political committee.	C	29464-2827	Amount of Each Receipt this Period 250.00
	Name of Employer Roper Hospital	Occupation VP of Nurs	sina	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
 B.	Full Name (Last, First, Middle Initial) Mr Bret Johnson Mailing Address 316 Calhoun Street	<u> </u>		Date of Receipt
				11 11 2009
	City Charleston	State SC	Zip Code 29401-1113	Transaction ID: 17700856 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	23401-1113	500.00
	Name of Employer Roper Hospital	Occupation Chief Fina	ncial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Mr. Matthew J Severance			Date of Receipt
	Mailing Address 316 Calhoun Street			1 1 1 2 0 0 9
	City	State	Zip Code	Transaction ID: 17700857
	Charleston FEC ID number of contributing federal political committee.	SC C	29401-1113	Amount of Each Receipt this Period 500.00
	Name of Employer Roper Hospital	Occupation Chief Exec	cutive Officer	
	Receipt For: Primary General Other (specify) ▼	. '	Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	
Full Name (Last, First, Middle Initial) Dr Steven D Shapiro, , M.D. Mailing Address 316 Calhoun Street City Charleston FEC ID number of contributing federal political committee. Name of Employer Roper Hospital Receipt For: Primary General Other (specify)	State Zip Code SC 29401-1113 C Occupation Vice President for Medical Affairs Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John Sullivan Mailing Address 316 Calhoun Street City Charleston FEC ID number of contributing	State Zip Code SC 29401-1113	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	Occupation CEO, Mt. Pleasant Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Michael Taylor Mailing Address 316 Calhoun Street		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charleston FEC ID number of contributing federal political committee.	State Zip Code SC 29401-1125	Transaction ID: 17700863 Amount of Each Receipt this Period 500.00
Name of Employer Roper Hospital Receipt For: Primary General Other (specify)	Occupation Chief Information Officer Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and a r for commercial purposes, other than using th	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Camiella S Patterson		Date of Receipt
	Mailing Address 103 Ashford Place		11 1 1 2 0 0 9
	City	State Zip Code SC 29646-9268	Transaction ID: 17700864
	Greenwood FEC ID number of contributing federal political committee.	SC 29646-9268 C	Amount of Each Receipt this Period 250.00
	Name of Employer Self Regional Healthcare	Occupation CFO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Craig White		Date of Receipt
	Mailing Address 503 Lodge Drive		11
	City	State Zip Code	Transaction ID: 17700865
	Greenwood FEC ID number of contributing federal political committee.	SC 29646-1919	Amount of Each Receipt this Period 250.00
	Name of Employer Self Regional Healthcare	Occupation VP Foundation/Compliance	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. J. Thornton Kirby		Date of Receipt
	Mailing Address 1000 Center Point Ro	ad	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17700866
	Columbia FEC ID number of contributing federal political committee.	SC 29210-5802	Amount of Each Receipt this Period 500.00
	Name of Employer South Carolina Hospital Association	Occupation President & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Γ	SUBTOTAL of Receipts This Page (optional) .		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 145 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Ingo Angermeier, , FACHE Mailing Address 101 East Wood Stre	et		Date of Receipt 1 1 1 1 2 0 0 9
City Spartanburg FEC ID number of contributing federal political committee.	State SC	Zip Code 29303-3016	Transaction ID: 17700867 Amount of Each Receipt this Period 500.00
Name of Employer Greenville Hospital System Receipt For: Primary General Other (specify) ▼	Occupatio CEO Aggregate	e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mark Aycock Mailing Address PO Box 1797			Date of Receipt 1 1 1 1 2 0 0 9
City Spartanburg FEC ID number of contributing federal political committee.	State SC	Zip Code 29304-1797	Transaction ID: 17700869 Amount of Each Receipt this Period 500.00
Name of Employer Spartanburg Regional Heal- thcare System Receipt For: Primary General Other (specify) ▼	Occupatio Sr. VP/C Aggregate]
Full Name (Last, First, Middle Initial) James Bearden Mailing Address 1127 Woodburn Roa	ad		Date of Receipt
City Spartanburg FEC ID number of contributing federal political committee.	State SC	Zip Code 29302-3435	Transaction ID: 17700870 Amount of Each Receipt this Period 500.00
Name of Employer Spartanburg Regional Heal- thcare System Receipt For: Primary General Other (specify) ▼	_,	n cal Research Year-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>		1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 145 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Sheila Breitweiser Mailing Address 695 Fairwinds Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17700871
Landrum FEC ID number of contributing federal political committee.	SC 29356-9077	Amount of Each Receipt this Period 500.00
Name of Employer Spartanburg Regional Heal- thcare System Receipt For: Primary General Other (specify) ▼	Occupation VP/Exec Director Foundation Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest B	vd.	Date of Receipt
City	State Zip Code	11 13 2009
Manasquan	NJ 08736-4001	Transaction ID: 17701437 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Information Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper	<u> </u>	Date of Receipt
Mailing Address 121 Clear Creek Road		1 1 1 3 2 0 0 9
City	State Zip Code	Transaction ID: 17701441
Langhorne	PA 19047-2306	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President, Human Resources	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 235.00	
CURTOTAL of Descints This Desc (antique)		630.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t	d Statements may not be sold or used by any person the name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		-
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane		Date of Receipt
City	State Zip Code	1 1 1 3 2 0 0 9 Transaction ID: 17701447
Livingston FEC ID number of contributing federal political committee.	NJ 07039-2750	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Vice President Continuing Care Service Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Ms. Alice J. Guttler Mailing Address 7 Ambrosia Way	1	Date of Receipt
City	State Zip Code	Transaction ID: 17701451
Freehold FEC ID number of contributing federal political committee.	NJ 07728-4020	Amount of Each Receipt this Period 250.00
Name of Employer CentraState Healthcare System Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President and Corporate C Aggregate Year-to-Date ▼ 250.00	† ;o
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt
Mailing Address 6180 Lower Mountai	in Road	1 1 1 3 2 0 0 9
City New Hope	State Zip Code	Transaction ID: 17701453
FEC ID number of contributing federal political committee.	PA 18938-5760	Amount of Each Receipt this Period 25.42
Name of Employer New Jersey Hospital Assoc- iation Receipt For:	Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	339.62	
SUBTOTAL of Receipts This Page (optional)	·)	280.42
TOTAL This Period (last page this line numb	per only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 145 (check only one) X 11a
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> . .	Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Avenue	•	Date of Receipt 1 1 1 3 2 0 0 9
	City	State Zip Code	Transaction ID: 17701454
	Pennington FEC ID number of contributing federal political committee.	NJ 08534-2302	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation General Counsel Aggregate Year-to-Date ▼ 365.00	
 3.	Full Name (Last, First, Middle Initial) Mr. John K Lloyd Mailing Address 11 Mohawk Avenue		Date of Receipt
	City	State Zip Code	1 1 1 3 2 0 0 9 Transaction ID: 17701459
	Oceanport	NJ 07757-1619	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Meridian Health	Occupation President and Chief Executive Office	er
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Ms. Ann P. Logan		Date of Receipt
	Mailing Address 17 Golf View Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17701460
	Princeton FEC ID number of contributing federal political committee.	NJ 08540-8442	Amount of Each Receipt this Period 250.00
	Name of Employer Solaris Health System	Occupation Vice President of Nursing	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Γ,	SUBTOTAL of Receipts This Page (optional)		755.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr. Mailing Address 4 Poppy Lane City Howell FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General	State Zip Code NJ 07731-1451 C Occupation VP Health Economics Aggregate Year-to-Date 235.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. James D. Jackson Mailing Address Post Office Box 668 City Prestonsburg FEC ID number of contributing federal political committee. Name of Employer Highlands Regional Medical Center	State Zip Code KY 41653-0668 C Occupation Chief Information Officer	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Robert D Fraraccio, , CHE Mailing Address P O Box 630 City Winchester	Aggregate Year-to-Date ▼ 600.00 State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Winchester FEC ID number of contributing federal political committee. Name of Employer Clark Regional Medical Center Receipt For: Primary General Other (specify) ▼	C Occupation Chief Executive Officer Aggregate Year-to-Date 1000.00	Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)		1725.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Jennifer D. Jackson Mailing Address 61 Hickory Lane City Madison FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify)	State Zip Code CT 06443-1718 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr Clarence Brewton Mailing Address 1833 Foxwood Circle City Mitchellville FEC ID number of contributing federal political committee. Name of Employer MedStar Health Receipt For: Primary General Other (specify)	State Zip Code MD 20721-4139 C Occupation Vice President , Regulatory Compliand Aggregate Year-to-Date 350.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas P. Nickels Mailing Address 325 Seventh Street, NV Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	State Zip Code DC 20004-2818 C Occupation Sr. Vice President, Federal Relations Aggregate Year-to-Date 1000.00	Date of Receipt M M M / 16 2009 Transaction ID: 17703436 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)	·····	2350.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 145 (check only one) X 11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Michael A Franklin, , FACHE			Date of Receipt
	Mailing Address 11418 Newport Bay Dr			11 1 16 2009
	City <u>Be</u> rlin	State MD	Zip Code 21811-9642	Transaction ID: 17703966 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		255.00
	Name of Employer Atlantic General Hospital	Occupation Presiden	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 255.00	
— В.	Full Name (Last, First, Middle Initial) Mr. James R Nathan			Date of Receipt
	Mailing Address 2776 Cleveland Avenu	ie		11 16 2009
	City Fort Myers	State FL	Zip Code 33901-5864	Transaction ID: 17704375
	FEC ID number of contributing federal political committee.	C	33901-3004	Amount of Each Receipt this Period 1000.00
	Name of Employer Lee Memorial Health System	Occupation Presiden		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
).	Full Name (Last, First, Middle Initial) Mr. Ralph Glatfelter	1		Date of Receipt
	Mailing Address 7285 Heartland Circle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State FL	Zip Code	Transaction ID: 17704376
	Tallahassee FEC ID number of contributing federal political committee.	C	32312-7501	Amount of Each Receipt this Period 10.00
	Name of Employer Florida Hospital Associat- ion	Occupation Senior V	n ice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1210.00	
	SUBTOTAL of Receipts This Page (optional)	1		1265.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any perso g the name and address of any political committee to C	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John E. Mines Mailing Address 1991 Killarney Driv City Winter Park FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary Other (specify)	State Zip Code FL 32789-3527 C Occupation Senior Vice President Aggregate Year-to-Date ▼ 1020.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. John Wilgis Mailing Address 307 Park Lake Circ City Orlando FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify)	State Zip Code FL 32803-3923 C Occupation Director, Emergency Mgmt. Svcs. Aggregate Year-to-Date ▼ 1210.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Robert W. Shryock Mailing Address 12914 Littleton Ber City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Brooks Rehabilitation Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 32224-7905 C Occupation Director Aggregate Year-to-Date 245.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	175.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC	j	
Full Name (Last, First, Middle Initial) Mr Timothy K Skeldon		Date of Receipt
Mailing Address 951 North Washing	ton Avenue	1 1 1 6 2 0 0 9
City	State Zip Code	Transaction ID: 17704384
Titusville	FL 32796-2194	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Parrish Medical Center	Occupation Senior Vice President and Chief Finan	q
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 620.00	
Full Name (Last, First, Middle Initial) Mr. Joe Johnson		Date of Receipt
Mailing Address 1055 Saxon Boulev	ard	M M / D D / Y Y Y Y Y 1 1 1 1 6 2 0 0 9
City	State Zip Code	Transaction ID: 17704748
Orange City	FL 32763-8468	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Florida Hospital Fish Mem- orial	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. Gregory Ohe		Date of Receipt
Mailing Address 10000 West Colonia	al Drive	1 1 1 6 2009
City	State Zip Code	Transaction ID: 17704749
<u>Ocoee</u>	FL 34761-3493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Health Central	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	ı)	490.00

TOTAL This Period (last page this line number only)

Mailing Address 2408 W. Watrous Avenue	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	llos concrete cobodulo(a)	FOR LINE NUMBER: PAGE 58 / 145 (check only one) X
Ms. Jean Mayer Mailing Address 2408 W. Watrous Avenue City Tampa FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital Primary General Other (specify) ▼ City State Zip Code FL 33629-5343 Full Name (Last, First, Middle Initial) Ms. Diane M. Kazmierski Mailing Address 4736 Royal Palm Circle, NE City State Zip Code Aggregate Year-to-Date ▼ City State Zip Code State Zip Code Transaction ID: 17704750 Transaction ID: 17704750 Transaction ID: 17704750 Amount of Each Receipt this Period Transaction ID: 17704750 Transaction ID: 17704750 Amount of Each Receipt this Period Transaction ID: 17704750 Transaction ID: 17704750 Transaction ID: 17704750 Amount of Each Receipt this Period Transaction ID: 17704750 Transaction ID: 17705720 Transaction ID: 17705720 Amount of Each Receipt this Period Transaction ID: 17705720 Amount of Each Receipt this Period	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person fine name and address of any political committee to so	or the purpose of soliciting contributions licit contributions from such committee.
Ms. Diane M. Kazmierski Mailing Address 4736 Royal Palm Circle, NE City State Zip Code Saint Petersburg FL 33703-3138 FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Primary General Other (specify) ▼ City State Zip Code Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Mr. John R. Brownlow Mailing Address 5608 Bear Lake Circle City State Zip Code Apopka FL 32703-1916 Transaction ID: 17704752 Amount of Each Receipt M M M M M M M M M M M M M M M M M M M	Ms. Jean Mayer Mailing Address 2408 W. Watrous Avective City Tampa FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital Receipt For: Primary General	State Zip Code FL 33629-5343 C Occupation Vice President for Strategic Services Aggregate Year-to-Date 295.00	1 1 1 1 6 2 0 0 9
Mr. John R. Brownlow Mailing Address 5608 Bear Lake Circle City State Zip Code Apopka FL 32703-1916 FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 17705720 Amount of Each Receipt this Period	Ms. Diane M. Kazmierski Mailing Address 4736 Royal Palm Cir City Saint Petersburg FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Receipt For: Primary General	State Zip Code FL 33703-3138 C Occupation Vice President, Managed Care Aggregate Year-to-Date	11 1 16 2009
Florida Hospital Vice President and Chief Operating Off Receipt For: Primary Other (specify) Other (specify) Occupation Vice President and Chief Operating Off Aggregate Year-to-Date 545.00	Mr. John R. Brownlow Mailing Address 5608 Bear Lake Circ City Apopka FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Receipt For: Primary General	State Zip Code FL 32703-1916 C Occupation Vice President and Chief Operating Off Aggregate Year-to-Date	1 1 1 1 6 2 0 0 9
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		135.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sol for each category Detailed Summa	y of the	FOR LINE NUMBER: PAGE 59 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used name and address of any political	by any person committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr Bill Ellis			Date of Receipt
	Mailing Address 6450 US Highway 1			11 16 2009
	City	State Zip Code FL 32955-5747		Transaction ID: 17705722
	Rockledge FEC ID number of contributing federal political committee.	FL 32955-5747		Amount of Each Receipt this Period 350.00
	Name of Employer Health First, Inc.	Occupation Vice President, Governme	ent Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	350.00	
– В.	Full Name (Last, First, Middle Initial) Mr. Joe Johnson			Date of Receipt
	Mailing Address 1055 Saxon Boulevard			1 1 1 6 2 0 0 9
	City	State Zip Code		Transaction ID: 17706286
	Orange City	FL 32763-8468		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer Florida Hospital Fish Mem- orial	Occupation President and Chief Execu	utive Officer	
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		240.00	
с. С.	Full Name (Last, First, Middle Initial) Mr Daniel R Morgan			Date of Receipt
	Mailing Address P O Box 59515			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: 17706537
	Panama City	FL 32402-2515		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Bay Medical Center	Occupation Chief Financial Officer		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	250.00	
	SUBTOTAL of Receipts This Page (optional)			720.00
t	TOTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 145 (check only one) X 11a
A	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\angle	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms Frieda Warren Mailing Address 616 n Bonita Ave		Date of Receipt
	City	State Zip Code	1 1 1 6 2 0 0 9 Transaction ID: 17706540
	Panama City	FL 32401-3624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Bay Medical Center	Occupation Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr Donald Connor	1	Date of Receipt
	Mailing Address 617 N Bonita Ave		11
	City	State Zip Code	Transaction ID: 17706859
	Panama City	FL 32401-3623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Bay Medical Center	Occupation Trustee	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Mr Floyd Skinner		Date of Receipt
	Mailing Address 618 N Bonita Ave		11 1 16 2009
	City Panama City	State Zip Code FL 32401-3624	Transaction ID: 17706860 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Bay Medical Center	Occupation Trustee	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Γ,	SUPTOTAL of Possints This Poss (entired)		750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John Robert Middlemas Mailing Address 620 N Bonita Ave City Panama City FEC ID number of contributing federal political committee. Name of Employer Bay Medical Center Receipt For: Primary General	State Zip Code FL 32401-3624 C Occupation Trustee Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms Greg Brundnicki Mailing Address 621 N. Bonita	250.00	Date of Receipt
City Panama City FEC ID number of contributing federal political committee. Name of Employer Bay Medical Center Receipt For: Primary General Other (specify)	State Zip Code FL 32401-3623 C Occupation Trustee Aggregate Year-to-Date 250.00	Transaction ID: 17706863 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr Paul Hunt Mailing Address 622 N Bonita Ave City Panama City FEC ID number of contributing	State Zip Code FL 32401-3624	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	ratements may not be sold or used by any person name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ .	Full Name (Last, First, Middle Initial) Mr James Cook Mailing Address 623 N Bonita Ave City Panama City	State Zip Code FL 32401-3623	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer Bay Medical Center Receipt For: Primary General Other (specify)	Occupation Trustee Aggregate Year-to-Date 250.00	250.00
— В.	Full Name (Last, First, Middle Initial) Ms. Phillis Oeters Mailing Address 6855 Red Road, Suite		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Miami FEC ID number of contributing federal political committee. Name of Employer Baptist Health South Florida Receipt For: Primary General Other (specify)	State Zip Code FL 33143-3632 C Occupation Corporate Vice President Government Aggregate Year-to-Date 500.00	Transaction ID: 17708669 Amount of Each Receipt this Period 500.00
— C.	Full Name (Last, First, Middle Initial) Mr. Douglas A. Dodson Mailing Address 9800 S. Healthpark Dri Suite #405 City Fort Myers FEC ID number of contributing federal political committee.	Ve State Zip Code FL 33908-7603 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Lee Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 2500.00	
s	UBTOTAL of Receipts This Page (optional)		3250.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 145 (check only one) X 11a
or for comm	ation copied from such Reports and St nercial purposes, other than using the DF COMMITTEE (In Full) can Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr John Mailing A City Jackso FEC ID federal p Name of Baptist N Receipt Pr	nville number of contributing political committee. Employer Medical Center		Zip Code 32207-8202 on erating Officer e Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. Mark Mailing A City Tallaha FEC ID federal p Name of Tallahas thCare Receipt Pr	assee number of contributing solitical committee. Employer ssee Memorial Heal-	State FL C Occupation Presiden	Zip Code 32308-5054 In and Chief Executive Officer Year-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Nam Mr. Alfred Mailing A City Pensac FEC ID federal p Name of Baptist I ration Receipt Pr	ne (Last, First, Middle Initial) d G Stubblefield Address 1717 North 'E' Street, S cola number of contributing political committee. Employer Health Care Corpo-	State FL C Occupatio Presiden		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTA	L of Receipts This Page (optional))	2500.00

Any information copied from such Reports and Star of for commercial purposes, other than using the results of for commercial purposes, other than using the results of for commercial purposes, other than using the results of for commercial purposes, other than using the results of for commercial purposes, other than using the results of for commercial purposes. Full Name (Last, First, Middle Initial) Mailing Address 400 N. Clyde Morris Blv City Daytona Beach FEC ID number of contributing federal political committee. Name of Employer Halifax Health Medical Center Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr Paul Goldstein Mailing Address 1414 Kuhl Avenue	name and address of any political committee to s	Date of Receipt Date of Receipt
Ms. Deanna Schaeffer Mailing Address 400 N. Clyde Morris Blv City Daytona Beach FEC ID number of contributing federal political committee. Name of Employer Halifax Health Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr Paul Goldstein Mailing Address 1414 Kuhl Avenue	State Zip Code FL 32114-2731 C Occupation CEO, Healthy Communities & GR Offi Aggregate Year-to-Date 500.00	Transaction ID: 17708778 Amount of Each Receipt this Period 500.00
Other (specify) Full Name (Last, First, Middle Initial) Mr Paul Goldstein Mailing Address 1414 Kuhl Avenue		
		Date of Receipt
Longwood	State Zip Code FL 32806-2093	Transaction ID: 17708779 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Orlando Regional Healthca- re Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President Finance and Chief Fina Aggregate Year-to-Date 250.00	in -
Full Name (Last, First, Middle Initial) Mr. William A Giudice Mailing Address 1300 Miccosukee Road		Date of Receipt
City	State Zip Code	1 1 1 1 6 2 0 0 9 Transaction ID: 17708780
<u>Tallahassee</u>	FL 32308-5093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer and Vice Presi Aggregate Year-to-Date 375.00	
SUBTOTAL of Receipts This Page (optional)	>	1125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 145 (check only one) X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jason Moore Mailing Address 2112 Doral Drive City Tallahassee	State Zip Code FL 32312-3159	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare Receipt For: Primary General Other (specify)	Occupation Chief Operating Officer Aggregate Year-to-Date 500.00	500.00
Full Name (Last, First, Middle Initial) Ms Ann Bernard Mailing Address 25 Arapaho Dr City Pensacola FEC ID number of contributing federal political committee. Name of Employer Baptist Health Care Corporation Receipt For: Primary General Other (specify)	State Zip Code FL 32507-8736 C Occupation VP, Child Protective Services Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Mark Faulkner Mailing Address P O Box 17500 City Pensacola FEC ID number of contributing federal political committee. Name of Employer Baptist Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 32522-7500 C Occupation Administrator Aggregate Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	1250.00

City New Haven CT 06519-1304 FEC ID number of contributing federal political committee. Name of Employer Yale New Haven Health System. Receipt For: Primary General Other (specify) ▼ City Dickinson FEC ID number of contributing federal political committee. Pagregate Year-to-Date ▼ Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code ND 58601-9570 FEC ID number of contributing federal political committee. Name of Employer Yale New Haven Health System. Executive Vice President Aggregate Year-to-Date ▼ Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code ND 58601-9570 FEC ID number of contributing federal political committee. Name of Employer MedCenter One Vice President, Professional Practices Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, III, M.D. Mailing Address 25117 Highway 15 City State Zip Code MS 39365-9088 Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code No 11 1 1 7 2 Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code No 11 1 1 7 2 Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code No 11 1 1 7 2 Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code No 11 1 1 7 2 Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code No 11 1 1 1 7 2 Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code No 11 1 1 1 7 2 Transaction ID: 17708947 Amount of Each Receipt this Period State Zip Code No 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(FEC Form 3X) EIPTS	(s) (c	OR LINE NUMBER: PAGE 66 / 145 check only one) X 11a 11b 11c 12 13 14 15 16 11
A. A. A. A. Macrican Hospital Association PAC Full Name (Last, First, Middle Initial) Mailing Address 789 Howard Avenue City New Haven CT 06519-1304 FEC ID number of contributing federal political committee. Name of Employer Vale New Haven Recept For: Primary General Other (specify) ▼ FEC ID number of contributing City State Zip Code President Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mailing Address 10326 Hwy, 10 City Dickinson FEC ID number of contributing federal political committee. Name of Employer Vale New Haven FEC ID number of contributing FEC ID number of c	ses, other than using the name and ad	y person fo	r the purpose of soliciting contributions cit contributions from such committee.
A. Ms. Gayle Capozzalo Hell Mailing Address 789 Howard Avenue City State Zip Code New Haven CT 06519-1304 FEC ID number of contributing federal political committee. Name of Employer Yale New Haven Health System Receipt For: Primary General Otter (Last, First, Middle Initial) Ms. Claudia Eisenmann Mailing Address 10326 Hwy. 10 City State Zip Code ND 58601-9570 FEC ID number of contributing federal political committee. C Transaction ID: 17708947 Amount of Each Receipt His P. Date of Receipt Transaction ID: 17708947 Amount of Each Receipt His P. Date of Receipt Transaction ID: 17708947 Amount of Each Receipt His P. C Transaction ID: 17708947 Amount of Each Receipt For: ND 58601-9570 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708940 Date of Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708940 Amount of Each Receipt File P. Transaction ID: 17708940 Amount of Each Receipt File P. Transaction ID: 17708940 Amount of Each Receipt File P. Transaction ID: 17708940 Amount of Each Receipt File P. Transaction ID: 17708940 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transaction ID: 17708947 Amount of Each Receipt File P. Transa	, ,		
City New Haven CT O6519-1304 FEC ID number of contributing federal political committee. Name of Employer MedCenter One Name of Employer MedCenter One Receipt For: Name of Employer MedCenter One Name of Employer Receipt For: Primary General Other (specify) ▼ Cuty Dickinson FEC ID number of contributing federal political committee. Cuty Full Name (Last, First, Middle Initial) Min. Thomas G Bariett, III, M.D. Mailing Address 25117 Highway 15 City Lity State Fill Name (Last, First, Middle Initial) Min. Thomas G Bariett, III, III, D. Mailing Address 25117 Highway 15 City Lity State State	Heil		•
New Haven FEC ID number of contributing federal political committee. Name of Employer Vale Now Haven Health System Receipt For:			11 17 2009
FEC ID number of contributing federal political committee. Name of Employer Yalen New Haven Health System Receipt For: Primary			
tem Receipt For:	ontributing		350.00
Primary	alth Sys- Occupation Executiv		
Ms. Claudia Eisenmann Mailing Address 10326 Hwy. 10 City State Zip Code ND 58601-9570 FEC ID number of contributing federal political committee. Name of Employer MedCenter One Receipt For: Primary General Other (specify) ▼ City State Zip Code ND 58601-9570 Cocupation Vice President, Professional Practices Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, Ill, M.D. Mailing Address 25117 Highway 15 City State Zip Code NS 39365-9088 FEC ID number of contributing federal political committee. Name of Employer Administrator Receipt For: Primary General Occupation Administrator Receipt For: Primary General Occupation Administrator Aggregate Year-to-Date ▼ Transaction ID: 17709060 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 17709060 Amount of Each Receipt this Primary General	General	0	
City Dickinson ND 58601-9570 FEC ID number of contributing federal political committee. Name of Employer MedCenter One Primary General Other (specify) ▼ City Union FEC ID number of contributing federal political committee. City Union FEC ID number of contributing federal political committee. 1 1 1 7 2 Transaction ID: 17708977 Amount of Each Receipt this P. 50 Date of Receipt M M M 1 D D D 1 P D D D D D D D D D D D D D D	nn ,		
Dickinson ND 58601-9570 Amount of Each Receipt this P FEC ID number of contributing federal political committee. Name of Employer MedCenter One Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, III, M.D. Mailing Address 25117 Highway 15 City State Zip Code Union MS 39365-9088 FEC ID number of contributing federal political committee. Name of Employer Laird Hospital Name of Employer Administrator Receipt For: Primary General Occupation Administrator Aggregate Year-to-Date ▼ 10	<u>, </u>		11 17 2009
FEC ID number of contributing federal political committee. Name of Employer MedCenter One Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, III, M.D. Mailing Address 25117 Highway 15 City State Zip Code Union MS 39365-9088 FEC ID number of contributing federal political committee. Name of Employer Laird Hospital Receipt For: Primary General Occupation Administrator Aggregate Year-to-Date ▼ Transaction ID: 17709060 Amount of Each Receipt this Permany General Aggregate Year-to-Date ▼			
NeedCenter One Vice President, Professional Practices	ontributing		500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, III, M.D. Mailing Address 25117 Highway 15 City State Zip Code Union MS 39365-9088 FEC ID number of contributing federal political committee. Name of Employer Laird Hospital Receipt For: Primary General State Zip Code Transaction ID: 17709060 Amount of Each Receipt this Primary General Aggregate Year-to-Date ▼	· '	actices	
Mr. Thomas G Bartlett, III, M.D. Mailing Address 25117 Highway 15 City State Zip Code Union MS 39365-9088 FEC ID number of contributing federal political committee. Name of Employer Laird Hospital Receipt For: Primary General Date of Receipt Transaction ID: 17709060 Amount of Each Receipt this Pounch for the political committee. Aggregate Year-to-Date ▼	General	0	
City Union State Zip Code MS 39365-9088 FEC ID number of contributing federal political committee. Name of Employer Laird Hospital Receipt For: Primary General State Zip Code Transaction ID: 17709060 Amount of Each Receipt this Political Committee. 25 Aggregate Year-to-Date ▼			Date of Receipt
Union MS 39365-9088 Amount of Each Receipt this Policy federal political committee. Name of Employer Laird Hospital Receipt For: Primary General Amount of Each Receipt this Policy federal political committee. Amount of Each Receipt this Policy federal political committee. Amount of Each Receipt this Policy federal political committee.	5117 Highway 15		
FEC ID number of contributing federal political committee. Name of Employer Laird Hospital Receipt For: Primary General C Occupation Administrator Aggregate Year-to-Date			
Receipt For: Primary General Administrator Aggregate Year-to-Date ▼	ontributing		250.00
Primary General	· · · · · · · · · · · · · · · · · · ·		
	Aggregate Aggregate	0	
SUBTOTAL of Receipts This Page (optional)	ts This Page (optional)	•	1100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the such as	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Charles L Denton		Date of Receipt
Mailing Address 960 Avent Drive		11 19 / 2009
City	State Zip Code	Transaction ID: 17709068
Grenada	MS 38901-5230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Grenada Lake Medical Cent- er	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	
Full Name (Last, First, Middle Initial) Mr. Steve Dickson		Date of Receipt
Mailing Address P.O. Box 1909		1 1 1 9 2 0 0 9
City	State Zip Code	Transaction ID: 17709069
Madison	MS 39130-1909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Mississippi Hospital Asso- ciation	Occupation President/CEO, Stratagem, Inc.	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 866.73	
Full Name (Last, First, Middle Initial) Mr. John Heer		Date of Receipt
Mailing Address 830 South Gloster S	Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17709075
Tupelo	MS 38801-4934	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer North Mississippi Health Services, Inc	Occupation President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		650.00
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 145 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Steve Adriaanse		Date of Receipt
Mailing Address 3042 Fermanagh Drive	9	M M / D D / Y Y Y Y Y Y 1 1 1 1 1 6 2 0 0 9
City	State Zip Code	Transaction ID: 17711701
Tallahassee	FL 32309-3333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tallahassee Memorial Heal-	Occupation HR Administrator	1
thCare Receipt For:	Aggregate Year-to-Date ▼	+
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Cynthia Blair		Date of Receipt
Mailing Address 7935 Preservation Roa	nd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17711704
<u>Tallahassee</u>	FL 32312-6766	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tallahassee Memorial Heal- thCare	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John J. Brady, III		Date of Receipt
Mailing Address 5 Lynnbrook Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17711760
Trumbull	CT 06611-3308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President, Business Developmen	nt &
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 145 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr James Staten		Date of Receipt
Mailing Address 20 York Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17711761
New Haven	CT 06510-3220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Yale-New Haven Hospital	Occupation Senior Vice President Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Joseph E Morris Mailing Address 2003 Lincoln Way		Date of Receipt
Mailing Address 2003 LITICOTT Way		11 20 2009
City	State Zip Code	Transaction ID: 17712060
Coeur D Alene	ID 83814-2611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kootenai Medical Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey W Martin		Date of Receipt
Mailing Address 700 South Main Stre	et	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17712061
Moscow	ID 83843-3056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Gritman Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1350.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC	;		
Full Name (Last, First, Middle Initial) Mr. Louis D Kraml, , CHE Mailing Address 98 Poplar Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Blackfoot	State ID	Zip Code 83221-1799	Transaction ID: 17712062 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Bingham Memorial Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Gary L. Fletcher			Date of Receipt
Mailing Address 1249 Harcourt Drive)		11 20 2009
City	State	Zip Code	Transaction ID: 17712063
Boise FEC ID number of contributing federal political committee.	C	83702-1839	Amount of Each Receipt this Period 250.00
Name of Employer St. Luke's Regional Medic- al Center	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Alan H Channing			Date of Receipt
Mailing Address California Avenue a	t 15th St		11 20 4 2009
City Chicago	State IL	Zip Code 60608-1610	Transaction ID: 17713950 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		800.00
Name of Employer Sinai Health System	Occupation Presiden	n t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)		1300.00
TOTAL This Period (last page this line number	-	·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Paul F. Hills Mailing Address 18 Heron Lane City Barrington FEC ID number of contributing federal political committee. Name of Employer Centegra Health System Receipt For: Primary General Other (specify)	State Zip Code IL 60010-5142 C Occupation Trustee Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Barbara Johnson Mailing Address 385 Millennium Drive City Crystal Lake FEC ID number of contributing federal political committee. Name of Employer Centegra Hospital - McHenry Receipt For: Primary General Other (specify)	State Zip Code IL 60012-3761 C Occupation Senior Vice President of Human Reso Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Angela McAuley Mailing Address 1301 Winston Circle City Woodstock FEC ID number of contributing federal political committee. Name of Employer Centegra Hospital - Woods-	State Zip Code IL 60098-3678 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
tock Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Senior Vice President, Women's Hea Aggregate Year-to-Date ▼ 250.00	750.00

ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE /2/145 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) Mr. Jason Sciarro			Date of Receipt
Mailing Address 14255 Castlebar Tra	il		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Woodstock	State IL	Zip Code 60098-8881	Transaction ID: 17713993 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00030 0001	800.00
Name of Employer Centegra Hospital - Woods- tock	Occupation Executive	n e Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial) Mr. Aaron T. Shepley			Date of Receipt
Mailing Address 385 Millennium Drive	Э		11 20 2009
City	State	Zip Code	Transaction ID: 17713995
Crystal Lake FEC ID number of contributing	C	60012-3740	Amount of Each Receipt this Period 250.00
federal political committee.	U .		
Name of Employer Centegra Health System	Occupation Chief Qu	n ality Officer/General Counse	el l
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Darryl L Vandervort			Date of Receipt
Mailing Address 403 East First Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17713998
<u>Dixon</u> FEC ID number of contributing federal political committee.	C	61021-3187	Amount of Each Receipt this Period 325.00
Name of Employer Katherine Shaw Bethea Hos- pital	Occupation Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional)	l		1375.00

City State Zip Code Naperville IL 60563-9339 FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Nalling Address 740 North Hayes City State Zip Code Pecepit For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Mark Deaton Mailing Address 740 North Hayes City State Zip Code Transaction ID: Amount of Each Date of Receipt Transaction ID: Amount of Each Date of Receipt Transaction ID: Amount of Each C Transaction ID: Amount of Each Primary General Occupation Sr. VP, General Counsel Aggregate Year-to-Date ▼ Transaction ID: Amount of Each Primary General Occupation Sr. VP, General Counsel Aggregate Year-to-Date ▼ Transaction ID: Date of Receipt Transaction ID: Date of Receipt Transaction ID: Date of Receipt Transaction ID:	R: PAGE 73 / 145 11c 12 15 16 1
Mailing Address 1151 East Warrenville Road City Naperville FEC ID number of contributing federal political committee. Name of Employer flinos Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Mark Deaton Mailing Address 740 North Hayes City State Zip Code IL 60302-1706 FEC ID number of contributing federal political committee. City State Zip Code IL 60302-1706 FEC ID number of contributing federal political committee. City Oak Park FEC ID number of contributing federal political committee. Name of Employer flinos Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Amount of Each Date of Receipt Transaction ID: Amount of Each Transaction ID: Trans	liciting contributions om such committee.
City Naperville FEC ID number of contributing federal political committee. Name of Employer lilinos Hospital Association Receipt For: Primary General Other (specify) ▼ FUII Name (Last, First, Middle Initial) Name of Employer selected committee. City Oak Park FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ City Oak Park FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ Full Name (Last, First, Middle Initial) Name of Employer General Other (specify) ▼ Full Name (Last, First, Middle Initial) State Zip Code IL 60302-1706 C Transaction ID: Amount of Each C Transaction ID: Amount of Each Date of Receipt Amount of Each C Transaction ID: Amount of Each Date of Receipt Transaction ID: Amount of Each C Transaction ID: Amount of Each Date of Receipt Transaction ID: Amount of Each C Transaction ID: Amount of Each Date of Receipt Transaction ID: Amount of Each C Transaction ID: Amount of Each Date of Receipt Transaction ID: Amount of Each C Transaction ID: Amount of Each	D / Y " Y " Y " Y
FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary	
tion Receipt For:	200.00
Mr. Mark Deaton Mailing Address 740 North Hayes City Cak Park IL 60302-1706 FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address Transaction ID: Amount of Each C C Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road City Naperville FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Date of Receipt Transaction ID: Amount of Each C Transaction ID: Amount of Each Occupation Director of Development	
City Oak Park FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road City Name of Employer Ill L 60302-1706 C C Amount of Each C C Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road City State Zip Code Naperville IL 60563-9339 FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Director of Development	2009
FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road City State Zip Code Transaction ID: Naperville IL 60563-9339 Transaction ID: Name of Employer Illinois Hospital Association Name of Employer Illinois Hospital Association Director of Development	
Illinois Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road City State Zip Code Naperville IL 60563-9339 FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Director of Development	Receipt this Period 416.70
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road City State Zip Code Naperville IL 60563-9339 FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association C Date of Receipt Transaction ID: Amount of Each Occupation Director of Development	
Ms. Nancy DeMarco Mailing Address 1151 East Warrenville Road City State Zip Code Naperville IL 60563-9339 FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Date of Receipt Transaction ID: Amount of Each Occupation Director of Development	
City State Zip Code Transaction ID: Naperville IL 60563-9339 Amount of Each PEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Director of Development	
City State Zip Code Transaction ID: Naperville IL 60563-9339 Amount of Each FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Director of Development	20 2009
FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Occupation Director of Development	
Illinois Hospital Association Director of Development	Receipt this Period 625.00
Receipt For:	
Primary General Other (specify) ▼ 1031.25	
SUBTOTAL of Receipts This Page (optional)	1241.70

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Lois DeTraglia		Date of Receipt
Mailing Address 1151 E. Warrenville R City	Rd. State Zip Code	1 1 2 0 2 0 0 9 Transaction ID: 17714014
Naperville	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.40
Name of Employer Illinois Hospital Associa- tion	Occupation Director, Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 343.86	
Full Name (Last, First, Middle Initial) Ms. Barbara Filliung		Date of Receipt
Mailing Address 1013 59th Street		11 20 2009
City	State Zip Code	Transaction ID: 17714015
<u>Lisle</u>	IL 60532-3122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.40
Name of Employer Illinois Hospital Associa- tion	Occupation Director, Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 343.86	
Full Name (Last, First, Middle Initial) Mr. Brian Foster		Date of Receipt
Mailing Address 1151 E. Warrenville R PO Box 3015		11 20 7 2009
City <u>Naperville</u>	State Zip Code IL 60563-9339	Transaction ID: 17714016
FEC ID number of contributing federal political committee.	C 00000-9339	Amount of Each Receipt this Period 416.70
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	687.55	
SUBTOTAL of Receipts This Page (optional)		833.50
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Tamara Lynn Gamrat Mailing Address 1911 Hamilton Street City Murphysboro FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Association Receipt For: Primary General	State Zip Code IL 62966-1519 C Occupation Administrator Aggregate Year-to-Date 257.89	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Ann C. Guild Mailing Address 1151 E. Warrenville Repo Box 3015 City Naperville FEC ID number of contributing federal political committee. Name of Employer		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Illinois Hospítal 'Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Ed Holzhauer	Assistant Vice President Aggregate Year-to-Date ▼ 687.55	Date of Receipt
Mr. Ed Holzhauer Mailing Address 1755 Maple Lane City Wheaton FEC ID number of contributing federal political committee. Name of Employer Central DuPage Hospital	State Zip Code IL 60187-3317 C Occupation	Transaction ID: 17714024 Amount of Each Receipt this Period 625.00
Receipt For: Primary General Other (specify)	President Aggregate Year-to-Date ▼ 1031.25	
SUBTOTAL of Receipts This Page (optional)	•	1198.00

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information co or for commercial p	pied from such Reports and Sta ourposes, other than using the r	atements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	MMITTEE (In Full) spital Association PAC			
Ms. Teresa Hurs				Date of Receipt
Mailing Address	1151 East Warrenville F	Road		11 20 2009
City Naperville		State IL	Zip Code 60563-9339	Transaction ID: 17714025
FEC ID numbe federal political		C	60363-9339	Amount of Each Receipt this Period 625.00
Name of Emplo Illinois Hospital tion	yer Associa-	Occupation Vice Pres	n sident, Finance	
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	Year-to-Date ▼ 1031.25	
Ms. Susan Kaufi				Date of Receipt
Mailing Address	1151 E. Warranville Rd	11 20 2009		
City		State	Zip Code	Transaction ID: 17714030
Naperville FEC ID numbe federal political		C	60563-9339	Amount of Each Receipt this Period 210.00
Name of Emplo Illinois Hospital tion	yer Associa-	Occupation Assistant	n : Vice President	
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	Year-to-Date ▼ 346.50	
Full Name (Las	t, First, Middle Initial) galis			Date of Receipt
Mailing Address	1151 East Warrenville I	Road		11 20 2009
City		State	Zip Code	Transaction ID: 17714034
Naperville FEC ID numbe federal political		C	60563-9339	Amount of Each Receipt this Period 208.40
Name of Emplo Illinois Hospital tion	yer Associa-	Occupation Director,	n Government Relations	
Receipt For: Primary Other (sp	General ecify) ▼	Aggregate	Year-to-Date ▼ 343.86	
SUBTOTAL of Ro	eceipts This Page (optional)		I	1043.40
	od (last page this line number o		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any per he name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Patricia Merryweather-Arges Mailing Address 1151 E. Warrenville PO Box 3015 City Naperville FEC ID number of contributing federal political committee. Name of Employer Illinois Hospital Associa-	State Zip Code IL 60563-9339 C Occupation	Date of Receipt M M M / 20 2009 Transaction ID: 17714035 Amount of Each Receipt this Period 625.00
tion Receipt For: Primary General Other (specify) ▼	Vice President Aggregate Year-to-Date ▼ 1031.25	
Full Name (Last, First, Middle Initial) Mr. Howard A. Peters, III Mailing Address 4109 Southwoods R	oad	Date of Receipt 1 1 2 0 2 0 9
City	State Zip Code	Transaction ID: 17714039
Springfield	IL 62707-6070	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer Illinois Hospital Associa- tion	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1031.25	
Full Name (Last, First, Middle Initial) Mr. John J. Raleigh	•	Date of Receipt
Mailing Address 1141 East Warrenvil	le Road	11 20 2009
City	State Zip Code	Transaction ID: 17714042
Naperville	IL 60563-1493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	450.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
		1700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Kenneth C. Robbins Mailing Address 1531 Maria Court		Date of Receipt
City	State Zip Code	1 1 2 0 2 0 0 9 Transaction ID: 17714044
Wheaton	IL 60187-3777	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer Illinois Hospital Associa- tion	Occupation President Emeritus	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1031.25	
Full Name (Last, First, Middle Initial) Ms. Jo Ann Spoor		Date of Receipt
Mailing Address 700 South Second S	11 20 4 2009	
City	State Zip Code	Transaction ID: 17714046
Springfield	IL 62704-2516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Illinois Hospital Associa- tion	Occupation Manager, Finance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	412.50	
Full Name (Last, First, Middle Initial) Ms. Laraine Williams		Date of Receipt
Mailing Address 1151 E. Warrenville	Road	11 20 7 2009
City	State Zip Code	Transaction ID: 17714050
Naperville	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer Illinois Hospital Associa- tion	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1031.25	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line numb	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Benorts and S	Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 79 / 145 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	e name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John B. Day		Date of Receipt
Mailing Address 101 Page Street		1 1 2 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17714747
New Bedford	MA 02740-3400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Southcoast Hospitals Group	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John Bomher	<u> </u>	Date of Receipt
Mailing Address 1151 E. Warrenville R	load	11 23 2009
City	State Zip Code	Transaction ID: 17714797
<u>Naperville</u>	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Illinois Hospital Associa- tion	Occupation Senior VP, Health Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Terry Brennan		Date of Receipt
Mailing Address 1 Saint Anthony's Way PO Box 340	у	11 23 7 2009
City	State Zip Code	Transaction ID: 17714798
Alton	IL 62002-4568	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Anthony's Health Ce- nter	Occupation Vice President Physician Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC FOI ITEMIZED RECEIPTS	·m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 145 (check only one)		
Any information copied from such Re or for commercial purposes, other that	ports and Statements may n using the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Associati	<u> </u>				
Full Name (Last, First, Middle Init Mr. Jonathan R. Bruss	al)		Date of Receipt		
Mailing Address 30 W 061 Ke	Mailing Address 30 W 061 Kensington Drive				
City Warrenville	State IL	Zip Code 60555	Transaction ID: 17714819 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		800.00		
Name of Employer Advocate Good Samaritan Hospital	Occupation Chief Exe	cutive Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 800.00			
Full Name (Last, First, Middle Init Mr. Danny Chun	al)		Date of Receipt		
Mailing Address 303 North O	ak Park Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Oak Park	State IL	Zip Code 60302-2189	Transaction ID: 17714820 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	00302-2103	250.00		
Name of Employer Illinois Hospital Associa- tion	Occupation Vice Pres	ident, Communications			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Init Mr. Michael S Eesley	al)		Date of Receipt		
Mailing Address 385 Millennin	ım Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Crystal Lake	State IL	Zip Code 60012-3761	Transaction ID: 17714822		
FEC ID number of contributing federal political committee.	C	00012-3701	Amount of Each Receipt this Period		
Name of Employer Centegra Health System	Occupation President	and Chief Executive Office	_		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼			
	<u> </u>		2050.00		

INE NUMBER: PAGE 81 / 145 sonly one) 1a 11b 11c 12
3 14 15 16 1 purpose of soliciting contributions ntributions from such committee.
te of Receipt
1 23 2009
nsaction ID: 17714823
800.00
te of Receipt
1 23 7 2009
nsaction ID: 17714831
nount of Each Receipt this Period
1000.00
te of Receipt
1 23 2009
nsaction ID: 17714832
ount of Each Receipt this Period
1950.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82/145 (check only one)		
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		, , , , , , , , , , , , , , , , , , , ,			
Full Name (Last, First, Middle Initial) Mr. James M. Hohner			Date of Receipt		
Mailing Address 2159 W. Agatite					
City Chicago	State IL	Zip Code 60625-1705	Transaction ID: 17714834 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Advocate Health Care	Occupation Director.	n Advocate Health Care Foun			
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. James Leonard			Date of Receipt		
Mailing Address 611 West Park Stre	eet		11 23 7 2009		
City Urbana	State IL	Zip Code 61801-2500	Transaction ID: 17714835		
FEC ID number of contributing federal political committee.	C	01001-2500	Amount of Each Receipt this Period 800.00		
Name of Employer Carle Foundation Hospital	Occupation President	n t and Chief Executive Office	r		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 800.00			
Full Name (Last, First, Middle Initial) Mr. Martin Manning			Date of Receipt		
Mailing Address 3013 Mary Kay Lan	ne		1 1 2 3 2 0 0 9		
City	State	Zip Code	Transaction ID: 17714840		
Glenview FEC ID number of contributing federal political committee.	C	60026-1162	Amount of Each Receipt this Period 800.00		
Name of Employer Advocate Health Care	Occupation Chief Exe	n ecutive Officer			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 800.00			
			1850.00		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 145 (check only one) X 11a
Ai	ny information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	ratements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Dominic Nakis Mailing Address 2268 River Woods Driv	ve	Date of Receipt 1 1 2 3 2 0 0 9
	City	State Zip Code IL 60565-6351	Transaction ID: 17714844
	Naperville FEC ID number of contributing federal political committee.	IL 60565-6351	Amount of Each Receipt this Period 800.00
	Name of Employer Advocate Health Care Receipt For: Primary General	Occupation Vice President, Finance Aggregate Year-to-Date ▼	1
_	Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Susan Nordstrom Lopez Mailing Address 836 West Wellington A		Date of Receipt
	City	1 1 2 3 2 0 0 9 Transaction ID: 17714855	
	Chicago	State Zip Code IL 60657-5147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Advocate IL Masonic Med Center	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Scott Powder		Date of Receipt
	Mailing Address 1775 Dempster		11 23 7 2009
	City	State Zip Code	Transaction ID: 17714858
	Park Ridge	IL 60068-1143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Advocate Lutheran General Hospital	Occupation SVP, Strategic Planning & Growth	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	SUBTOTAL of Receipts This Page (optional)	_	1300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Marc A. Senesac Mailing Address 3815 Highland Avenu		Date of Receipt
		11 23 2009
City Downers Grove	State Zip Code IL 60515-1500	Transaction ID: 17714870 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Advocate IL Masonic Med Center	Occupation Regional Vice President HR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Jim H Skogsbergh Mailing Address 2025 Windsor Drive		Date of Receipt
		11 23 2009
City Oak Brook	State Zip Code IL 60523-1586	Transaction ID: 17714874
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer Advocate Health Care	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Mr Carl G Herde		Date of Receipt
Mailing Address 4007 Kresge Way		1 1 2 4 2 0 0 9
City	State Zip Code	Transaction ID: 17716080
Louisville FEC ID number of contributing federal political committee.	KY 40207-4677	Amount of Each Receipt this Period 250.00
Name of Employer Baptist Healthcare System	Occupation Vice President and Chief Financial Of	- f
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·	1400.00
	` _	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER: PAGE 85 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold on name and address of any p	or used by any perso olitical committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Tommy J Smith			Date of Receipt
	Mailing Address 4007 Kresge Way			11 24 2009
	City Louisville	State Zip Code KY 40207-4		Transaction ID: 17716089 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Baptist Healthcare System	Occupation President and Chief	Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	500.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Bruce A Klockars, , CHE Mailing Address 4305 New Shepherdsy	ille Road		Date of Receipt
				11 24 2009
	City Bardstown	State Zip Code KY 40004-9		Transaction ID: 17716090 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Flaget Memorial Hospital	Occupation President and Chief	Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	500.00	
 C.	Full Name (Last, First, Middle Initial) Mr Joseph G Koch			Date of Receipt
	Mailing Address 9 Linville Drive			1 1 2 4 2 0 0 9
	City Paris	State Zip Code KY 40361-2		Transaction ID: 17716091
	FEC ID number of contributing federal political committee.	C 40361-2	129	Amount of Each Receipt this Period 250.00
	Name of Employer Bourbon Community Hospital	Occupation CEO		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	250.00	
	SUBTOTAL of Receipts This Page (optional)		.	1250.00
F	TOTAL This Period (last page this line number		·	

SCHEDULE A (FITEMIZED RECE			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 145 (check only one) X
Any information copied from for commercial purposes NAME OF COMMITTE American Hospital	es, other than using the name EE (In Full)	nents may r e and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mr. John D Harryman Mailing Address 400	11 Dutchmans Lane	State	Zip Code	Date of Receipt M
Louisville		KY	40207-4799	Amount of Each Receipt this Period
FEC ID number of con federal political commit	tributing	C	40207-4733	250.00
Name of Employer Norton Suburban Hosp Receipt For: Primary Other (specify)	General A	Occupation President Aggregate Y	/ear-to-Date ▼ 250.00	
Full Name (Last, First, Mr. Thomas D Kmetz Mailing Address 982	Middle Initial) 20 Third Street Road			Date of Receipt 1 1 2 4 2 0 0 9
City		State	Zip Code	Transaction ID: 17717499
Louisville		KY	40272-2802	Amount of Each Receipt this Period
FEC ID number of con federal political commit	tributing	С		500.00
Name of Employer Norton Southwest Hos	nital	occupation President		
Receipt For: Primary Other (specify)	General	Aggregate Y	/ear-to-Date ▼ 500.00	
Full Name (Last, First, Mr Steven Maclauchlan	Middle Initial)			Date of Receipt
Mailing Address On	e Audubon Plaza Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 17717500
<u>Louisville</u>		KY	40217-1318	Amount of Each Receipt this Period
FEC ID number of con federal political commit		С		250.00
Name of Employer Norton Healthcare	I	occupation President		
Receipt For: Primary Other (specify)	General	Aggregate Y	/ear-to-Date ▼ 250.00	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	parate schedule(s) n category of the d Summary Page	FOR LINE NUMBER: PAGE 87 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sol name and address of an	d or used by any perso y political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Ms. Tracy E Williams Mailing Address 234 East Gray Street, S	Ste. 225		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Co		Transaction ID: 17717505
	Louisville	KY 40202	2-1913	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Norton Healthcare	Occupation Senior Vice Presid	dent	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Di	ate ▼ 250.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Douglas A. Winkelhake Mailing Address 8911 Duxburry Road			Date of Receipt
	- Duxburry Hodu			11 24 2009
	City	State Zip Co		Transaction ID: 17717506
	Louisville FEC ID number of contributing federal political committee.	KY 4024:	2-6910	Amount of Each Receipt this Period 250.00
	Name of Employer Norton Suburban Hospital	Occupation Chief Operating O	fficer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr Mark Armstrong			Date of Receipt
	Mailing Address 310 South Limestone S	Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Co		Transaction ID: 17717507
	Lexington	KY 40508	8-3008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer UK HealthCare Good Samari- tan Hospital	Occupation Chief Operating O		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Day	ate ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			800.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 145 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Jack G. Blackwell			Date of Receipt
Mailing Address 2201 Forest Ave			11 24 2009
City	State	Zip Code	Transaction ID: 17717508
Ashland FEC ID number of contributing federal political committee.	C	41101	Amount of Each Receipt this Period 500.00
Name of Employer Highlands Regional Medical Center Receipt For: Primary General Other (specify)		n ancial Officer P Year-to-Date ▼ 500.00	1
Full Name (Last, First, Middle Initial) Mr. Edward Nairn Mailing Address Highlands Regional	Med Ctr		Date of Receipt
Box 668 City State Zip Code			11 24 2009
Prestonburg	KY	41653-0668	Transaction ID: 17717512 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Highlands Regional Medical	Occupation Board Me		
Center Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Patrick Donahue			Date of Receipt
Mailing Address 4604 Highway 60 W	/est		11 24 2009
City Morganfield	State KY	Zip Code	Transaction ID: 17717514
FEC ID number of contributing federal political committee.	C	42437-9570	Amount of Each Receipt this Period 250.00
Name of Employer Methodist Hospital Union County	Occupation Administ	rator	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 145 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ne name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jerry Haynes Mailing Address P O Box 8086 City Lexington FEC ID number of contributing federal political committee. Name of Employer Appalachian Regional Healthcare Receipt For: Primary General Other (specify)	State Zip Code KY 40533-8086 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Frank A. Butler Mailing Address 437 Adair Road City Lexington FEC ID number of contributing federal political committee. Name of Employer University of Kentucky Hospital Receipt For: Primary General Other (specify)	State Zip Code KY 40536-0001 C Occupation Vice President/Medical Center Operation Aggregate Year-to-Date 500.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr Joseph DeVenuto Mailing Address 4001 Dutchmans Lan City Louisville FEC ID number of contributing federal political committee. Name of Employer Norton Suburban Hospital Receipt For: Primary General Other (specify)	State Zip Code KY 40207-4714 C Occupation Assistant Vice President/CIO Aggregate Year-to-Date 250.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	1250.00

SCHEDULE A (ITEMIZED REC	•		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 145 (check only one) X
or for commercial purpo NAME OF COMMIT	ses, other than using the na	ements may me and add	not be sold or used by any persor ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, Firs		ve		Date of Receipt
City	Jo King & Daughters Dir	State KY	Zip Code	1 1 2 4 2 0 0 9 Transaction ID: 17717520
Frankfort FEC ID number of confederal political comm		C	40601-6514	Amount of Each Receipt this Period 260.00
Name of Employer Frankfort Regional M Center Receipt For: Primary Other (specify)	General		ecutive Officer Year-to-Date 400.00	
Full Name (Last, Firs Mr. Jeffrey Seraphine Mailing Address 1	et, Middle Initial) 140 Lexington Road			Date of Receipt 1 1 2 4 2 0 0 9
City		State	Zip Code	Transaction ID: 17717522
Georgetown FEC ID number of co	ontributing	KY C	40324-9330	Amount of Each Receipt this Period 500.00
federal political comm	nittee.			300.00
Name of Employer Lake Cumberland Re Hospital	egional	Occupation Chief Exe	o cutive Officer	
Receipt For: Primary Other (specify)	General ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, Firs	t, Middle Initial)			Date of Receipt
Mailing Address 30	050 Rio Dosa Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 17717525
Lexington FEC ID number of co federal political comm		C	40509-9990	Amount of Each Receipt this Period 500.00
Name of Employer Ridge Behavioral He System	alth		cutive Officer and Managing	 g Ф
Receipt For: Primary Other (specify)	General ▼	Aggregate	Year-to-Date ▼ 500.00	
	ts This Page (optional)			1260.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 145 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Robert Shaw Mailing Address 19 Hill River Rd City Louisville FEC ID number of contributing federal political committee. Name of Employer Norton Healthcare Receipt For: Primary General Other (specify)	State Zip Code KY 40207-1191 C Occupation President Cancer Institute Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Joel Gilbertson Mailing Address 2100 Lake Washin Unit I-101 City Renton FEC ID number of contributing federal political committee. Name of Employer Providence Health & Services Receipt For: Primary General Other (specify)	State Zip Code WA 98056-1449 C Occupation VP, Government & Public Affairs Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms Stephanie L Bloom Mailing Address 109 Rowan Court City Manahawkin FEC ID number of contributing federal political committee. Name of Employer Community Medical Center Receipt For: Primary General Other (specify)	State Zip Code NJ 08050-2900 C Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	Date of Receipt M M C 27 2009 Transaction ID: 17718691 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (option	nal)	1750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ai	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr		Date of Receipt
	Mailing Address 2378 Orchard Crest Blv	vd.	1 1 2 7 2 0 0 9
	City	State Zip Code	Transaction ID: 17718696
	Manasquan	NJ 08736-4001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Information Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
— 3.	Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper		Date of Receipt
	Mailing Address 121 Clear Creek Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17718703
	Langhorne	PA 19047-2306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President, Human Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
	Full Name (Last, First, Middle Initial) Mr. Ronald J Del Mauro		Date of Receipt
	Mailing Address 50 Sherwood Drive		1 1 2 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Watchung	State Zip Code NJ 07069-6136	Transaction ID: 17718705 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Saint Barnabas Health Care System	Occupation President and Chief Executive Officer	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
s	SUBTOTAL of Receipts This Page (optional)		510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein	,	Date of Receipt
Mailing Address 27 Harvest Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17718710
<u>Livingston</u>	NJ 07039-2750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer New Jersey Hospital Assoc-	Occupation	
iation Receipt For:	Vice President Continuing Care Servic Aggregate Year-to-Date ▼	e -
Primary General Other (specify) ▼	Aggregate Year-to-Date ¥	
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt
Mailing Address 6180 Lower Mounta	1 1 2 7 2 0 0 9	
City	State Zip Code	Transaction ID: 17718715
New Hope	PA 18938-5760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 344.62	
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 23 E. Delaware Ave	nue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17718716
Pennington	NJ 08534-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	
SUBTOTAL of Receipts This Page (optional) >	25.00

TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.		Date of Receipt
Mailing Address 4 Poppy Lane	State Zip Code	1 1 2 7 2 0 0 9 1 1 7 1 1 7 1 0 7 0 0 9
City Howell	NJ 07731-1451	Transaction ID: 17718738 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation VP Health Economics	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Mr C.J. Christensen		Date of Receipt
Mailing Address 400 Lakeview Drive		11 30 7 2009
City	State Zip Code	Transaction ID: 17720875
<u>Marion</u>	KY 42064-7208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Crittenden County Hospital	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Wayne A. Smith		Date of Receipt
Mailing Address 1280 South Governo	rs Avenue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17721101
Dover	DE 19904-4802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	690.00
Name of Employer Delaware Healthcare Assoc- iation	Occupation President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	690.00	
SUBTOTAL of Receipts This Page (optional)		1045.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 145 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	13 14 15 16 n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Delia O'Connor		Date of Receipt
Mailing Address 25 Highland Avenue	7.0.1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17721104
Newburyport FEC ID number of contributing federal political committee.	MA 01950-3867	Amount of Each Receipt this Period 300.00
Name of Employer Anna Jaques Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) Mr. Jason Carlson		Date of Receipt
Mailing Address 30 South Behl Street		1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17721112
<u>Appleton</u>	MN 56208-1616	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer Appleton Area Health Serv- ices	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Mr. James F Hanko		Date of Receipt
Mailing Address 1300 Anne St. NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17721118
Bemidji	MN 56601-5103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer North Country Regional Ho- spital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SURTOTAL of Receipts This Page (optional)		440.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 96 / 145 (check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Lawrence J Massa			Date of Receipt
Mailing Address 2550 University Ave	enue W.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17721119
Saint Paul	MN	55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Minnesota Hospital Associ- ation	Occupation President		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		820.00]
Full Name (Last, First, Middle Initial) Mr. Kevin E Lofton			Date of Receipt
Mailing Address 47 Tamarade Drive			11 30 YYYYY 2009
City	State	Zip Code	Transaction ID: 17721127
Littleton	CO	80127-3519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Catholic Health Initiativ- es	Occupation President	n t and Chief Executive Office	_ r
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	1
			1
Full Name (Last, First, Middle Initial) Ms. Katie Vaughan			Date of Receipt
Mailing Address 506A East Howell A	Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR1034595123063
Alexandria	VA	22301-1216	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Hospital Associa- tion-Washingt	- 	e Director	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		460.00	P/R Deduction (\$20.00 Bi- Weekly)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton			Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W		11 30 7 2009
City	State	Zip Code	Transaction ID: PR1045726223063
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vi	n ce President & General Cour	nse
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		897.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Sarah Berk			Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR1082532723063
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		38.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior As	n esociate Director	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		304.00	P/R Deduction (\$19.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Barbara Jellen			Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR1113464223063
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Section D	n Director, Constituency Section	1
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)			144.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 145 (check only one) X 11a 11b 11c 12 15 16 11
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Davon Gray		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		11 30 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1143013023063
	FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Legislative Assistant	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
	Mailing Address One North Franklin		1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1260472923063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Professional Practice, AON	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Michelle M. Mathy		Date of Receipt
	Mailing Address 506A Howell		11 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1300853723063
	Alexandria FEC ID number of contributing federal political committee.	VA 22301-1216	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manager AHAPAC Coordinator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
	CURTOTAL of Descipts This Dags (antional)		84.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A or	ny information copied from such Reports and S for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Stephen Mayfield		Date of Receipt
	Mailing Address One North Franklin Str Suite 32139		11 30 2009
	City	State Zip Code	Transaction ID: PR1302378923063
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	86.96
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	869.60	P/R Deduction (\$43.48 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. James Wadzinski	<u> </u>	Date of Receipt
	Mailing Address One North Franklin		1 1 3 0 / Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347703423063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President Account Services	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1110.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347703623063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary ☐ General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
			166.96

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 145 (check only one) X
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
ا	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		11 30 / Y Y Y Y Y
	Chicago	State Zip Code	Transaction ID: PR1347791023063
	Chicago FEC ID number of contributing	IL 60606-3436	Amount of Each Receipt this Period 28.00
	federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Operations, AONE	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W	11 30 2009
	City	State Zip Code	Transaction ID: PR1384065323063
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	897.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1492459923063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Executive Director - ASHHI	RA
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	460.00	P/R Deduction (\$20.00 Bi- Weekly)
	CURTOTAL of Descints This Days (antional)		146.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 101 / 145 (check only one) X
4	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be name and address of	e sold or used by any person of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Monica D Day			Date of Receipt
	Mailing Address 10224 Prince Place #2	205		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Largo		ip Code 20774-1210	Transaction ID: PR1516850623063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.18
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Political Affairs		
	Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 306.39	P/R Deduction (\$14.59 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Elisa Arespacochaga			Date of Receipt
	Mailing Address One North Franklin			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		ip Code	Transaction ID: PR1555656223063
	Chicago	IL 6	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.44
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Dire	ecor, Constituency Sec	tio
	Receipt For:	Aggregate Year-		
	Primary General Other (specify) ▼	0 0 0	304.40	P/R Deduction (\$15.22 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Clinton S. Manning	l		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W		1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		ip Code	Transaction ID: PR1555656523063
	Washington	DC 2	20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.44
	Name of Employer American Hospital Associa- tion-Washingt	, '	Advocacy & Member C	Commu
	Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 304.40	P/R Deduction (\$15.22 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			90.06

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sch for each category Detailed Summan	of the (Check only one)
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Kathy Poole		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1589439923063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	31.82
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Governance Proj	ects
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		P/R Deduction (\$15.91 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Linda Fishman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	V	11 30 7 2009
	City	State Zip Code	Transaction ID: PR327629123063
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	78.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Senior Vice President, Pub	olic Policy
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
	Mailing Address 11004 Petersborough	Drive	1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327745923063
	Rockville	MD 20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advo	cacy
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		P/R Deduction (\$39.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		187.82

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 145 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue		Date of Receipt
-	Mailing Address 122 N. Greenwood Ave	enue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327771623063
	Park Ridge	IL 60068-3227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik		Date of Receipt
	Mailing Address One North Franklin		11 30 2009
	City	State Zip Code	Transaction ID: PR327777223063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenu	е	1 1 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327777823063
	Oak Park	IL 60304-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		96.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 145 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
Mailing Address 1003 Kimberly Place		111 30 7 2009
City Great Falls	State Zip Code VA 22066-1546	Transaction ID: PR327801723063 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V	11 30 7 2009
City	State Zip Code DC 20004-2818	Transaction ID: PR327812023063
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Executive Officer, AONE	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
Mailing Address 6034 North 22nd Street		1 1 3 0 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327831723063
Arlington FEC ID number of contributing federal political committee.	VA 22205-3408	Amount of Each Receipt this Period 40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		158.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan		Date of Receipt
Mailing Address One North Franklin Str		11 30 4 2009
City Chicago	State Zip Code IL 60606	Transaction ID: PR327846223063 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General	Occupation Vice President, Meetings & Travel Ser Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga		Date of Receipt
Mailing Address 2401 Calvert Street, NV Apt. 1008	V	1 1 3 0 / Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327851923063
Washington	DC 20008-2614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy Development	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Mark Seklecki		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700		11 30 7 2009
City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327858023063 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Political Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		146.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each o	rate schedule(s) ategory of the Summary Page	FOR LINE NUMBER: PAGE 106 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16
A 0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold and address of any page 1	or used by any person political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
, <u>, , , , , , , , , , , , , , , , , , </u>	Full Name (Last, First, Middle Initial) Mr. John F. Barry			Date of Receipt
	Mailing Address One North Franklin			11 7 30 7 2009
	City <u>Millis</u>	State Zip Cod MA 60606-3		Transaction ID: PR327877823063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive		-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	897.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom			Date of Receipt
	Mailing Address 130 North Garland Co #3002	urt		11 30 7 2009
	City	State Zip Cod		Transaction ID: PR327895723063
	Chicago FEC ID number of contributing federal political committee.	IL 60602-4	4750	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa-	Occupation		-
	tion-Chicago Receipt For:	Vice President	· *	-
	Primary General Other (specify) ▼	Aggregate Year-to-Date	460.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Judy Williams			Date of Receipt
	Mailing Address One North Franklin S	reet		11 30 2009
	City	State Zip Cod	е	Transaction ID: PR327918923063
	Chicago	IL 60606		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director Membershi		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	322.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional).			146.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A 0	r for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock	. Al	Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		11 30 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR328132823063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
 3.	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach	I	Date of Receipt
	Mailing Address 204 7th Ave		11 30 2009
	City	State Zip Code	Transaction ID: PR328136923063
	La Grange FEC ID number of contributing federal political committee.	IL 60525-6406	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
	Mailing Address One North Franklin Str	reet	11 30 2009
	City	State Zip Code	Transaction ID: PR328174923063
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director, SHSMD	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		184.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 145 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		11 30 2009
	City Chicago	State Zip Code IL 60640-1318	Transaction ID: PR328223823063
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	897.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.	<u> </u>	Date of Receipt
	Mailing Address 13106 Vingle Lane		11 30 YYYYY 2009
	City	State Zip Code	Transaction ID: PR328224923063
	Silver Spring	MD 20906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	897.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328241423063
	Eagle	ID 83616-5369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Pi
	Other (specify)	460.00	P/R Deduction (\$20.00 Bi- Weekly)
		\	196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 145 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack			Date of Receipt
	Mailing Address 3475 North Venice Str	eet		11 30 2009
	City Arlington	State VA	Zip Code 22207-4446	Transaction ID: PR328260923063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	ZZZOT TTTO	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Executive	n e Vice President	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade	I		Date of Receipt
	Mailing Address 1221 Cavalier Road	M M / D D / Y Y Y Y Y 1 1 1 3 0 2 0 0 9		
	City	State	Zip Code	Transaction ID: PR328310423063
	Arnold	MD	21012-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupatio Senior V	n ice President Strategic Com	milin
	Receipt For:	, '	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	897.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor	1		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328341823063
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	, '	n Political Action & Grassroot Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	897.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			234.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (crieck only one)
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by name and address of any political col	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		11 30 7 2009
	City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR328490123063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify)	Occupation Senior Associate Director Aggregate Year-to-Date ▼	P/R Deduction (\$10.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina		Date of Receipt
	Mailing Address 200 Clover Hill Court	11 30 4 2009	
	City	State Zip Code	Transaction ID: PR328511823063
	Yardley	PA 19067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	89	7.00 P/R Deduction (\$39.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell		Date of Receipt
	Mailing Address 1501 N. Harrison Street	et	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328512023063
	Arlington	VA 22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Vice President, Media Relation	ons
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 46	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		138.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 145 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. George Arges		Date of Receipt
	Mailing Address One North Franklin St		11 30 2009
	City Chicago	State Zip Code IL 60606	Transaction ID: PR328641123063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.46
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director, Health Data Manag	gemen
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	431.81	P/R Deduction (\$22.73 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke		Date of Receipt
	Mailing Address One North Franklin Av	1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR328913323063
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	88.00
	Name of Employer American Hospital Associa- tion	Occupation President & CEO, AHA Solutions, I	nc.
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 880.00	P/R Deduction (\$44.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey	Date of Receipt	
	Mailing Address One North Franklin St	reet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR329013423063
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
			173.46

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 145 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address One North Franklin		11 30 2009
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR329071323063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & Chief Operating Officer,	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	11 30 2009	
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR329084423063
	FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR329215723063
	Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
	Mailing Address One North Franklin Str	11 30 7 2009	
	Chicago	State Zip Code	Transaction ID: PR329342623063
	Chicago FEC ID number of contributing	IL 60606	Amount of Each Receipt this Period
	federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President & CFO	
	Receipt For:	Aggregate Year-to-Date ▼	7
	Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris		Date of Receipt
	Mailing Address 1136 W. Farwell Ave.	1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR329654223063
	Chicago	IL 60626-3861	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASDVS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	322.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman	Date of Receipt	
	Mailing Address One North Franklin	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR330343323063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	460.00	P/R Deduction (\$20.00 Bi- Weekly)
	DUDTOTAL of Descript This Description		96.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 145 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
Mailing Address One North Franklin		11 30 7 9 9
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330411623063
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00
Name of Employer American Hospital Associa- tion-Contrago	Occupation Associate Regional Executive	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V	11 / 30 / 2009
City	State Zip Code	Transaction ID: PR330465223063
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Deputy General Counsel	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
Mailing Address 4960 138th Cricle Wes	t	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR330475423063
Apple Valley	MN 55124-9229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		146.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 145 (check only one) X
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard		Date of Receipt
Mailing Address 6109 North 9th Road		11 30 7 2009
City Arlington	State Zip Code VA 22205-1609	Transaction ID: PR330534323063 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR330547723063
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Strategic Planning	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
Mailing Address 172 Atteridge		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR330549223063
Lake Forest FEC ID number of contributing federal political committee.	IL 60045-1715	Amount of Each Receipt this Period 94.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Constituency Section	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 865.00	P/R Deduction (\$47.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		174.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 145 (check only one) X
A C	Any information copied from such Reports and Sor for commercial purposes, other than using the	atements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Walter James Reiter		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		111 30 7 9 9
	City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR330776123063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation V.P., Advocacy & Member Comm	nunications
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
_ s.	Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
	Mailing Address 1101 N. Kentucky Stre	11 30 7 2009	
	City	State Zip Code	Transaction ID: PR331278823063
	Arlington FEC ID number of contributing federal political committee.	VA 22205-3515	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, State Issues Forum	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
	Mailing Address 26 West Glendale Ave.		11 30 2009
	City	State Zip Code	Transaction ID: PR331304223063
	Alexandria FEC ID number of contributing federal political committee.	VA 22301-2402	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Public Po	olicy Op
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi-Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		108.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 145 (check only one) X
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	11 30 4 2009		
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR331379123063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼		n tor Federal Relations & Police Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR331386923063
			20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior A	n ssociate Director	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.			Date of Receipt
	Mailing Address PO Box 15587			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331416023063
	Austin	TX	78761-5587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		116.00
	Name of Employer American Hospital Associa- tion-Chicago	, ' 	Executive	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1334.00	P/R Deduction (\$58.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		172.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		11 30 2009
	City Falls Church	State Zip Code VA 22046-2613	Transaction ID: PR331533223063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 22040-2013	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	897.00	P/R Deduction (\$39.00 Bi- Weekly)
_ 3.	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
	Mailing Address One North Franklin	1 1 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR346168123063
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	39.84
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	440.40	P/R Deduction (\$19.92 Bi- Weekly)
-).	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		11 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR517619723063
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Relati	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 897.00	P/R Deduction (\$39.00 Bi- Weekly)
_	□ Outor (opcorry) ♥		
	SUBTOTAL of Receipts This Page (optional)		195.84
	TOTAL This Period (last page this line number	<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 145 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. <u> </u>	Full Name (Last, First, Middle Initial) Ms. Megan Cundari		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	11 30 2009	
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR518031923063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 20004 2010	43.48
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 434.80	P/R Deduction (\$21.74 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Laura M. Werner		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	11 30 7 2009	
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR560101523063
	FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 30.44
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Project Manager	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 304.40	P/R Deduction (\$15.22 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson	Date of Receipt	
	Mailing Address 325 Seventh Street, NV	N	11 30 2009
	City	State Zip Code	Transaction ID: PR566280923063
	Washington FEC ID number of contributing federal political committee.	DC 20004-2802	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relation	ons
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		113.92

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 145 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not e name and address	be sold or used by any perso s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson			Date of Receipt
	Mailing Address 606 S. Royal St.			11 30 7 2009
	City <u>Alexandria</u>	State VA	Zip Code 22314-4142	Transaction ID: PR766023723063 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Pol	icy	
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 460.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			1 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR801366323063
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Assoc	ciate Director Policy	
	Receipt For:	Aggregate Yea	ar-to-Date V	
	Primary General Other (specify) ▼	0 0 0	322.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	1W		11 30 YYYYY 2009
	City	State	Zip Code	Transaction ID: PR876637223063
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Hospital Associa- tion-Washingt	_ '	nt, Legislative Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 437.00	P/R Deduction (\$21.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		110.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements ma name and ad	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any persordress of any political committee to	FOR LINE NUMBER: PAGE 121 / 145 (check only one) X
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
A .	Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows Mailing Address 325 Seventh Street, NV Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt	State DC C Occupation Senior D	irector of Operations	Date of Receipt 1 1 3 0 2 0 0 9 Transaction ID: PR936292323063 Amount of Each Receipt this Period 28.00
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. David A. Strickland Mailing Address One N. Franklin Street City Chicago	State IL	Zip Code 60606	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago	-	e Director Quality Center	28.00
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 322.00	P/R Deduction (\$14.00 Bi- Weekly)

		F0.00
SUBTOTAL of Receipts This Page (optional)	•	56.00
TOTAL This Period (last page this line number only)		107896.47

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 145 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perne name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) AZHHA Political Action Committee (Federal)		Date of Receipt
Mailing Address 2901 North Central A Suite 900		11 02 4 2009
City Phoenix	State Zip Code AZ 85012	Transaction ID: 17653586 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00217687	14349.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 27075.00	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federa Mailing Address 1215 K Street	al	Date of Receipt
Suite 800		11 02 2009
City Sacramento	State Zip Code CA 95814	Transaction ID: 17655978 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00237495	10000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 150000.00	
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal		Date of Receipt
Mailing Address P.O. Box 15587		M M / D D / Y Y Y Y Y 1 Y 1 1 1 1 1 2 0 0 9
City	State Zip Code	Transaction ID: 17700777
Austin FEC ID number of contributing federal political committee.	TX 78761-5587 C C00301325	Amount of Each Receipt this Period 12000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 63500.00	
SUBTOTAL of Receipts This Page (optional)		36349.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 145 (check only one) 11a 11b 11c X 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal Mailing Address 1215 K Street Suite 800 City Sacramento FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code CA 95814 C C00237495 Occupation Aggregate Year-to-Date 160000.00	Date of Receipt M M M J D D J Z 2009 Transaction ID: 17700823 Amount of Each Receipt this Period 10000.00
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park D City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	rive State Zip Code WI 53725-9038 C C00359455 Occupation Aggregate Year-to-Date 13775.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Healthcare Association of Hawaii PAC Mailing Address 932 Ward Avenue, Sui City Honolulu FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	te 430 State Zip Code HI 96814 C C00159061 Occupation Aggregate Year-to-Date 1000.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		11500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 145 (check only one) 11a 11b 11c X 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
/	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal			Date of Receipt
	Mailing Address 1215 K Street Suite 800			11 23 7 2009
	City	State	Zip Code	Transaction ID: 17714911
	Sacramento	CA	95814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00)237495	10000.00
	Name of Employer	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	00 0	Year-to-Date ▼ 170000.00	

SUBTOTAL of Receipts This Page (optional)	>	10000.00
TOTAL This Period (last page this line number only)	•	57849.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 145 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full) American Hospital Association PAG	C		
Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW City	State	Zip Code	Date of Receipt M
Washington FEC ID number of contributing federal political committee.	C	20005	Amount of Each Receipt this Period 253.14
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	Year-to-Date ▼ 3005.70	Interest Earned

SUBTOTAL of Receipts This Page (optional)	•	253.14
TOTAL This Period (last page this line number only)	•	253.14

	Use separate schedu				check on	E NUMBER: PAGE 126 / 145 ly one)							
	EMIZED DISBURSEMENTS	for each category Detailed Summar	y Page		21b 27	22 28a	X 23 28b		С	25 29			
	y Information copied from such Reports and for commercial purposes, other than using th												
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC												
<u> </u>	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress					Date	of Disbur		00882				
	Mailing Address P.O. Box 2232					1 1	M / D	05	ž	0 ŏ 9	Y		
	City Jenkintown	State Zip Co				Amou	nt of Eac	h Disbur	semen	t this P	'erioc		
	Purpose of Disbursement Contribution			0	11	L.			10	00.00			
	Candidate Name Rep. Allyson Y. Schwartz			Cate	egory/ ype								
	Senate President		010 General			Contr	ibution						
	State: PA District: 13 Full Name (Last, First, Middle Initial)					Trans	action II	D: 177	00884				
	Texans For Lamar Smith					Date o	of Disbur	sement			Υ		
	Mailing Address PO Box 6155					11		05	2	0 0 9			
	City San Antonio	State Zip Co TX 7820				Amou	nt of Eac	h Disbur	semen	t this P	'erio		
	Purpose of Disbursement Contribution				11	L.			10	00.00	_		
	Candidate Name Rep. Lamar S. Smith				egory/ ype								
	Office Sought: X House Senate President State: TX District: 21		010 General			Contr	ibution						
	Full Name (Last, First, Middle Initial) Kevin McCarthy For Congress					Date o	of Disbur						
	Mailing Address P.O. Box 12667					1 1	M / D	05	^Y 2	0 ŏ 9	Y		
	City Bakersfield	State Zip Co				Amou	nt of Eac	h Disbur	semen	t this P	'erio		
	Purpose of Disbursement Contribution			Q	11				30	00.00	_		
	Candidate Name Rep. Kevin McCarthy				egory/ ype								
	Office Sought: X House Senate President State: CA District: 22		010 General			Contr	ibution						
	UBTOTAL of Disbursements This Page (opt						· ·	v v	504	00.00			

ITE		•		Jse sepa	arate schedule(s)		-	E NUMBER: PAGE 127 /	143
	MIZED DIS	SBURSEMEN [®]	TS fo	or each d	category of the Summary Page		(check on 21b 27	nly one) 22 X 23 24 25 28a 28b 28c 29	П
								n for the purpose of soliciting contributions solicit contributions from such committee	
N	IAME OF COMI	MITTEE (In Full) pital Association Pa			so or any pontion				
	full Name (Last, Coulson For C	First, Middle Initial) ongress						Transaction ID: 17700891 Date of Disbursement	
M	Mailing Address	PO Box 2354						M 1 M / D 5 / Y 2 0 0 9	Υ
	City Glenview		Stat IL	е	Zip Code 60025			Amount of Each Disbursement this P	-
C	Purpose of Disbu Contribution Candidate Name	ırsement)11	2000.00	
E	Elizabeth Coul	son X House	Disbursemer	nt For:	2010		egory/ ype		
		Senate President	X Pri		General			Contribution	
F	State: IL Full Name (Last, Friends For Ha	District: 10 First, Middle Initial) arry Reid						Transaction ID: 17700893 Date of Disbursement	
_	Mailing Address	P.O. Box 19163	}					M M / D D D / Y Y Y O O 9	Y
	City .as Vegas		Stat NV		Zip Code 89132			Amount of Each Disbursement this P	erio
P	Purpose of Disbu	irsement				C)11	2500.00	
C						C at	egory/		
$\frac{C}{C}$	Candidate Name Sen. Harry Rei	id					ype		
0 0	Candidate Name Sen. Harry Rei Office Sought:	House X Senate President		nt For: imary her (spe	2010 X General cify)			Contribution	
S	Candidate Name Sen. Harry Rei Office Sought: State: NV full Name (Last,	House X Senate	Pri	imary	X General			Transaction ID: 17700896 Date of Disbursement	
S O S A	Candidate Name Sen. Harry Rei Office Sought: State: NV full Name (Last,	House X Senate President District: First, Middle Initial)	Pri	imary	X General			Transaction ID: 17700896	Y
S S S	Candidate Name Sen. Harry Rei Office Sought: State: NV Full Name (Last, A Lot Of Peopl Mailing Address Dity Vausau	House X Senate President District: First, Middle Initial) le For Dave Obey P O Box 1322 PO Box 1322	Pri	imary her (spe	X General			Transaction ID: 17700896 Date of Disbursement M M / D 1 D / Y Y Y O 0 9 Amount of Each Disbursement this P	eric
S F A W P C	Candidate Name Sen. Harry Rei Office Sought: State: NV full Name (Last, A Lot Of Peopl Mailing Address City Vausau Purpose of Disbu Contribution	House X Senate President District: First, Middle Initial) le For Dave Obey P O Box 1322 PO Box 1322	Pri Otl	imary her (spe	X General cify) ▼	Т)11	Transaction ID: 17700896 Date of Disbursement D 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	eric
S O S F A M C W P C C C F	Candidate Name Gen. Harry Rei Office Sought: State: NV full Name (Last, A Lot Of Peopl Mailing Address City Vausau Curpose of Disbu Contribution Candidate Name Rep. David R.	House X Senate President District: First, Middle Initial) le For Dave Obey P O Box 1322 PO Box 1322 rrsement Obey	Stat WI	imary her (spe	X General circify) ▼ Zip Code 54402	C	уре	Transaction ID: 17700896 Date of Disbursement M M / D 1 D / Y Y Y O 0 9 Amount of Each Disbursement this P	erio
S S O S S O S S O S O S O S O S O S O S	Candidate Name Sen. Harry Rei Office Sought: State: NV Full Name (Last, A Lot Of Peopl Mailing Address City Vausau Curpose of Disbuctontribution Candidate Name	House X Senate President District: First, Middle Initial) le For Dave Obey P O Box 1322 PO Box 1322	Stat WI Disbursemer	imary her (spe	X General cify) ▼ Zip Code 54402 2010 X General	C	011 egory/	Transaction ID: 17700896 Date of Disbursement M M / D 1 D / Y Y Y O 0 9 Amount of Each Disbursement this P	erio

ITELUSED BIABLIBATIONS	Use separate schedule(s	·)	(ch	neck only	one)							145
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b	П	24 28c		25 29	$\prod_{i=1}^{2}$
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n				person f	or the pu		e of s		ing co		utions	\perp
NAME OF COMMITTEE (In Full)												
American Hospital Association PAC												
Full Name (Last, First, Middle Initial)					Trans					897		
Kathy Dahlkemper For Congress					Date of	of Di	/ D	D	nt / Y	Y	0 ŏ 9	Υ
Mailing Address PO Box 1045					11		1	U	L		009	
City Erie	State Zip Code PA 16512				Amou	nt o	f Each	Disk	ourse	ment	this F	Period
Purpose of Disbursement Contribution			01			_				100	00.00	
Candidate Name Rep. Kathleen A. Dahlkemper		Ca	ateg Typ	ory/								
	x Primary General Other (specify)	1	- 76		Contr	ibut	ion					
Full Name (Last, First, Middle Initial) Lincoln Diaz-Balart For Congress					Trans Date				nt		V	V
Mailing Address 1001 Brickell Bay Driv 9th Floor	e				1 1	M			/ Y	ž	0 ŏ 9) *
City Miami	State Zip Code FL 33131				Amou	nt o	f Each	Disk	ourse		this F	
Purpose of Disbursement Contribution		Т	01	1						250	00.00	
Candidate Name Rep. Lincoln G. Diaz-Balart			ateg Typ	,								
Office Sought: X House Senate President State: FL District: 21	x Primary General Other (specify) ▼	•			Contr	ibut	ion					
Full Name (Last, First, Middle Initial) Hastings For Congress					Trans		sburs			906		
Mailing Address P.O. Box 100277					1 ^M 1	M	/ D	Ō	/ Y	ž	0 ŏ 9	Y
City Ft. Lauderdale	State Zip Code FL 33310				Amou	nt o	f Each	Disk	ourse	ment	this F	Period
Purpose of Disbursement Contribution			01°	1						250	00.00	
Candidate Name Rep. Alcee L. Hastings			ateg Typ	ory/ e								
	rrsement For: 2010 X Primary General Other (specify) ▼	1	71"		Contr	ibut	ion					
State: FL District: 23						_						
	al)									600	00.00	1

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) (check	INE NUMBER: PAGE 129 / 145 only one)
TEMIZED DISBURSEMENTS	Detailed Summary Page 21 27	22 X 23 24 25 28 28 28 29
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mario Diaz-Balart For Congress		Transaction ID: 17700907 Date of Disbursement
Mailing Address 95 Merrick Way, Suite	250	111 / 10 / 2009
City Coral Gables	State Zip Code FL 33134	Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution Candidate Name	011 Category/	2500.00
Rep. Mario Diaz-Balart	Type 2010	
Senate President	X Primary General Other (specify) ▼	Contribution
State: FL District: 25 Full Name (Last, First, Middle Initial) Klein For Congress		Transaction ID: 17700909 Date of Disbursement
Mailing Address 21301 Powerline Road	I, Suite 204	1 1 1 0 Y 2 0 0 9 Y
City Boca Raton	State Zip Code FL 33431	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	011	2500.00
Candidate Name Rep. Ronald Klein	Category/ Type	
Office Sought: X House Senate President State: FL District: 22	rsement For: 2010 X Primary General Other (specify) ▼	Contribution
Full Name (Last, First, Middle Initial) Ros-Lehtinen For Congress		Transaction ID: 17700912 Date of Disbursement
Mailing Address P O Box 52-2784		111 D D D Y 2009
City Miami	State Zip Code FL 33152	Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution	011	2500.00
Candidate Name Rep. Ileana Ros-Lehtinen	Category/ Type	
Senate President	rsement For: 2010 X Primary General Other (specify) ▼	Contribution
State: FL District: 18		
		7500.00

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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Tom Rooney For Congress			Transaction ID: 17700913 Date of Disbursement 11 1 0 2 0 0 9
Mailing Address 2336 S. East Ocean E #313	Blvd.		11
City Stuart	State Zip Code FL 34996)	Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution Candidate Name		011 Category/	2500.00
Rep. Tom Rooney Office Sought: X House Disbu	irsement For: 2010 X Primary Ger	Type	Contribution
President State: FL District: 16	Other (specify)		
Full Name (Last, First, Middle Initial) Wasserman-Schultz For Congress			Transaction ID: 17700914 Date of Disbursement
Mailing Address 1071 Twin Branch Ln			11 D D D Y Y Y O O O
City Weston	State Zip Code FL 33326	;	Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution Candidate Name		011 Category/	2500.00
Rep. Debbie Wasserman-Schultz		Type	_
Office Sought: X House Senate President State: FL District: 20	rsement For: 2010 X Primary Ger Other (specify) ▼) neral	Contribution
Full Name (Last, First, Middle Initial) Friends Of Bill Posey			Transaction ID: 17700915 Date of Disbursement
Mailing Address P. O. Box 360877			M M / D D / Y Y Y O Y Y
City Melbourne	State Zip Code FL 32936	,	Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	1500.00
Candidate Name Rep. Bill Posey	-	Category/ Type	
Office Sought: X House Senate President State: FL District: 15	rsement For: 2010 X Primary Ger Other (specify) ▼) neral	Contribution
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NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Vern Buchanan For Congress		Transaction ID: 17700922 Date of Disbursement
Mailing Address P. O. Box 48928		111 / 10 / 2009
City Sarasota	State Zip Code FL 34230	Amount of Each Disbursement this Per
Purpose of Disbursement Contribution	011	1000.00
Candidate Name Rep. Vernon Buchanan	Category/ Type	
Senate President	ement For: 2010 Primary General Other (specify)	Contribution
State: FL District: 13 Full Name (Last, First, Middle Initial) Friends Of Ginny Brown-Waite		Transaction ID: 17700925 Date of Disbursement
Mailing Address PO Box 865		111
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City Brooksville	State Zip Code FL 34605	Amount of Each Disbursement this Per
Purpose of Disbursement Contribution	011	2500.00
Candidate Name Rep. Virginia Brown-Waite	Category/ Type	
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Full Name (Last, First, Middle Initial) Bilirakis For Congress		Transaction ID: 17700927 Date of Disbursement
Mailing Address PO Box 606		111 / 10 / 2009
City Tarpon Springs	State Zip Code FL 34688	Amount of Each Disbursement this Per
Purpose of Disbursement Contribution	011	1500.00
Candidate Name Rep. Gus M. Bilirakis	Category/ Type	
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Gingrey For Congress		Transaction ID: 17704925 Date of Disbursement
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City Marietta	State Zip Code GA 30060	Amount of Each Disbursement this Period
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Candidate Name Rep. Phil Gingrey, M.D.	Category/ Type	
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State: GA District: 11 Full Name (Last, First, Middle Initial) Bill Shuster For Congress		Transaction ID: 17704926 Date of Disbursement
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City Hollidaysburg	State Zip Code PA 16648	Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution	011	1000.00
Candidate Name Rep. William Franklin Shuster	Category/ Type	
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Full Name (Last, First, Middle Initial) John Lewis For Congress		Transaction ID: 17704927 Date of Disbursement
Mailing Address PO Box 2323		111 M / D 13 / Y 2009
City Atlanta	State Zip Code GA 30301	Amount of Each Disbursement this Peri
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<u>/</u>	Full Name (Last, First, Middle Initial) McCaul For Congress, Inc						action of Disb	ursem	ent		V	V
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	Candidate Name Amy Klobuchar				gory/ pe							
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Full Name (Last, First, Middle Initial) Committee To Re-Elect Loretta Sanchez					action ID f Disburs	: 17708 ement	3980	
Mailing Address 1212 S. Victory Blvd. Suite 211				11	/ D	5 /	200	9 ^Y
Burbank	itate Zip Code CA 91502			Amour	nt of Each	Disburse	ement this	
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Mailing Address PO Box 530788				1 1		9	ŽOĎ	9
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Full Name (Last, First, Middle Initial) Simpson For Congress				Date o	f Disburs			
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<u>/</u>	Full Name (Last, First, Middle Initial) Boyd For Congress				Transaction ID: 17714825 Date of Disbursement
	Mailing Address P.O. Box 15703				M M / D D / Y Y Y O O 9
	City Tallahassee	State FL	Zip Code 32317		Amount of Each Disbursement this Period
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	Raleigh Purpose of Disbursement Contribution Candidate Name Rep. Brad Miller Office Sought: X House Senate President	NC Disbursement For: X Primary	27605 2010 General	Category/	Contribution Transaction ID: 17714862 Date of Disbursement
	Raleigh Purpose of Disbursement Contribution Candidate Name Rep. Brad Miller Office Sought: X House Senate President State: NC District: 13 Full Name (Last, First, Middle Initial)	Disbursement For: X Primary Other (sp.	27605 2010 General	Category/	Contribution Transaction ID: 17714862
	Raleigh Purpose of Disbursement Contribution Candidate Name Rep. Brad Miller Office Sought: X House Senate President State: NC District: 13 Full Name (Last, First, Middle Initial) Ben Chandler For Congress	Disbursement For: X Primary Other (sp.	27605 2010 General	Category/	Contribution Transaction ID: 17714862 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Raleigh Purpose of Disbursement Contribution Candidate Name Rep. Brad Miller Office Sought: X House Senate President State: NC District: 13 Full Name (Last, First, Middle Initial) Ben Chandler For Congress Mailing Address P. O. Box 12678 City Lexington Purpose of Disbursement Contribution	Disbursement For: X Primary Other (sp.	2010 General ecify) ▼	Category/ Type	Contribution Transaction ID: 17714862 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	NAME OF COMMITTEE (In Full) American Hospital Association PAC		<u> </u>								
<u> </u>	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress						action ID		5888		
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	Full Name (Last, First, Middle Initial) Steve Rothman For New Jersey Inc.						action of Disk		1776 nent	7081		
	Mailing Address P.O. Box 714					1 1	M /	^D 23	3 /	ž	0 ŏ 9	Y
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	Candidate Name Rep. Steven R. Rothman				egory/ /pe							
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	Mailing Address P.O. Box 182152					1 1	M /	^D 23	3 /	Ý Ž	0 ŏ 9	Y
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	Mailing Address PO Box 226					1 1	M /	^D 23	3 /	ž	0 Ď 9	Y
	City Bloomfield Hills	State Zip Code MI 48303				Amou	nt of E	ach [isburs	-	-	-
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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC	, i.a.i.o aio ada. 000 0, ai, poilio	a. 00						σασ			
<u>′</u>	Full Name (Last, First, Middle Initial) Mike Rogers For Congress					Trans			1778 ment	35817	7	
	Mailing Address 123 East 13th Stree	t				1 ^M 1	M /	^D 2	3 /	Ž	0 0 9) ^Y
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	Full Name (Last, First, Middle Initial) Bright For Congress.Com					Trans		burse		36965	5	
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	Full Name (Last, I Rex Rice For C				Date of		isburse		_		Υ					
_	Mailing Address 301 Providence Way PO Box 1706									111 D 23 Y 2009						
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5	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 143 / 145								
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or	for commercial purposes, other than using the	name and address of any political co	ommittee to so	olicit contributions from such committee								
$\overline{}$	NAME OF COMMITTEE (In Full)											
\rangle	American Hospital Association PAC											
	Full Name (Last, First, Middle Initial)			Transaction ID: 17814007								
	National Leadership PAC			Date of Disbursement								
			111 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
	Mailing Address 635 B Pennsylvania	Ave.		11 02 2009								
	City	State Zip Code		Amount of Each Disbursement this Period								
	Washington	DC 20005										
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23 24 25 26 28a 28b 28c 29 30b
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American Hospital Association PAC			
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 17804713 Date of Disbursement
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Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		Merchant Fees
State: District: Full Name (Last, First, Middle Initial)			
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City Chicago	State Zip Code IL 60679		Amount of Each Disbursement this Period
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City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Fees		001	80.85
Candidate Name		Category/ Type	
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\	NAME OF COMMIT	ΓΤΕΕ (In Full)																
/	American Hospit	al Association P	AC															
	Full Name (Last, Fir Citibank, F.S.B. Mailing Address	st, Middle Initial) 1400 G Street,	NW							Date o		burse	-	78047 ent		0 ŏ 9	Y	
	City Washington			State DC	Zip Code 20005					Amou	nt of	Each	Dis	burser				d
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